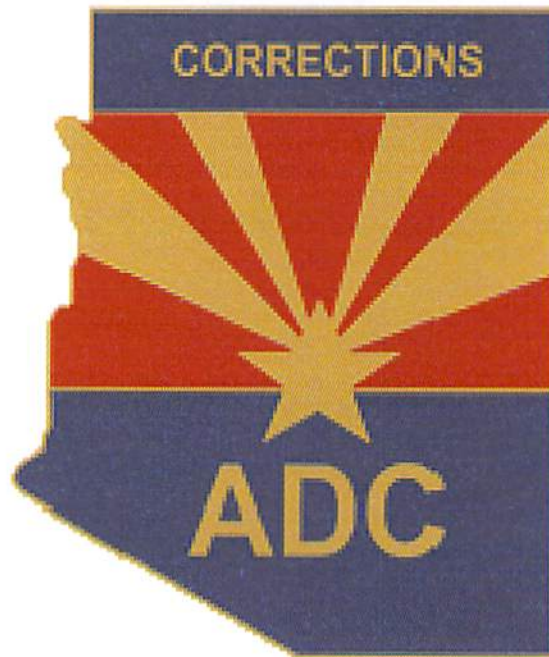


ARIZONA DEPARTMENT



OF CORRECTIONS

**ARIZONA DEPARTMENT OF CORRECTIONS
INSPECTOR GENERAL BUREAU**

Inspections Unit

ASPC-YUMA ANNUAL INSPECTION

February 18, 2011

Executive Summary
ASPC – Yuma

COMPLEX OVERVIEW:

ASPC-Yuma is a 4913 bed prison complex of adult male inmates ranging from minimum to close custody with approximately 975 staff.

AUDIT SCOPE:

The inspection began on February 14, 2011 and was completed on February 18, 2011. The Review included the following units: Complex, Cheyenne, Cibola, Cocopah, Dakota and La Paz.

INSPECTION METHODOLOGY:

With New Data Collection Instruments, (DCI's) the Inspections Unit inspected thirteen competencies.

INSPECTIONS TEAM:

The Inspections team consisted of 6 members of the Inspections Unit and two Correctional Officer IV's from Central Classification.

| | | |
|-----------------|--------------------------------------|-------------|
| Larry Ridge | Key Control / Tool Control | Team Leader |
| Ron Abbl | Count Movement / Perimeters - Towers | |
| William Houser | Detention Services / Inmate Services | |
| Jeffrey Lewis | Ingress Egress / Required Services | |
| Barbra Savage | Security Devices / Weapons | |
| Lynette Stevens | Food Service / Inmate Management | |
| James Roan | Classification | |
| John Weiss | Classification | |

RECAP OF FINDINGS:

There were a total of 212 findings for ASPC-Yuma. The findings are as follows.

| | |
|------------------|-----------|
| Complex- | 39 |
| Cheyenne- | 53 |
| Cibola - | 38 |
| Cocopah - | 28 |
| Dakota - | 37 |
| La Paz - | 17 |

COMPLEX

CLASSIFICATION

1. Observe the OIU filing process. Is there an acceptable backlog present?

Finding: Filing backlog: Some of the paperwork waiting to be filed was dated 9/24/10, 10/4/10, and 10/24/10

2. Do inmate escape fliers have a front and side digital photograph of the inmate?

Finding: Inmate Blackshire 229715 did not have a profile photo included in his escape flier, only a front shot was in the file. DO 901.08, 1.1.2.1

3. Does the receiving institution OIU Manager compare the previous photo in the institution file/release packet with the digital photo taken upon receipt of the release violator/escapee to verify the identity of the inmate?

Finding: Per OIU Manager, Denise Soria, Transportation Sgt. compares the photos. DO 901.08, 1.3.2.2

4. Review random inmate files in OIU and ensure the file contains the required information.

Finding: Inmate Smith 254175 had no body receipt on side 2 of the institutional file. Also, the Scars/Deformities, Marks/Tattoos form 901-3 was not found in any of the observed files. DO 901.08, 1.1 through 1.3.2.3

COUNT MOVEMENT

1. Does the Warden or designee notify the ROD/DD and Offender Services Bureau in writing when deactivating, reactivating or "red lining" a specific bed?

Finding: The Warden stated he does not notify the ROD/DD and Offender Services Bureau in writing when deactivating or "red lining" a specific bed. It was observed at the Dakota unit cells were identified on the unit count board as being "Red Lined" due to maintenance issues such as broken plumbing fixtures which had not been properly reported as an inoperable bed through the Wardens office. DO 701.01, 1.5.1

COMPLEX

KEYS / RADIOS

1. Is a Locksmith Work Order, Form 702-6 used when repair or replacement of key/key rings are required?

Finding: Complex key control officer stated he uses the 403-2 form instead of the 702-6 form. DO 702.02, 1.2.2.1

2. If inmates are possession of keys does the key control officer have copies of the written approval for inmate to have possession of keys?

Finding: When interviewed, Capt. Miller stated he has not seen nor knows of any written approval or memo from the Warden or Deputy Warden for inmates to use or be in possession of keys. The inmates observed were driving road worthy vehicles including cars, sedans, vans, semi trucks. DO 702.02, 1.3.3.1.1

3. Are all manufacturer numbers maintained in the master key inventory?

Finding: Manufacturer numbers are not maintained in the Master key inventory. DO 702.04, 1.8

SECURITY DEVICES

1. Has the unit / complex Chief of Security generated a canned statement which demonstrates a consistent approach to documenting security device inspections by all security staff throughout the unit / complex?

Finding: The statement required by the Institutional Order is not being consistently used by the staff to log SDIs. DO 703.01, 1.3

2. Does the Chief of Security maintain a current file of all documentation relating to inspections, maintenance requests, follow-up actions, and preventive maintenance programs within the institution/unit?

Finding: The COS does not document the follow-up actions for SDI deficiencies. DO 703.01, 1.1.3

3. Does the Chief of Security ensure SDI work order log repairs are made within time frames?

Finding: One entry in SDI log dated 10/10 stated "Awaiting Equip/Parts" with no further explanation for delay in the repair. DO 703.01, 1.4.4

COMPLEX

4. Does the documentation support Deputy Warden's and Chief's of Security submit exception reports noting any deficiencies observed during their tours

Finding: Capt. Miller did not submit tour reports for Nov 2010, Dec 2010 and Jan 2011. DO 703.02, 1.2.6 - 1.2.6.2

5. Do the duty officer and EEO Liaison submit reports to the Wardens Office?

Finding: The EEO Liaison has been on extended leave for three months. Reports have not been submitted to the Wardens office during the time of absence. DO 703.02, 1.5.2

6. Does a review of random EEO Liaison reports indicate the assigned EEO liaison is making required tours?

Finding: There has not been an EEO Liaison on duty for at least three months and no one has been appointed to assume this responsibility. DO 703.02, 1.5.2

TOOLS

1. Are tool stored in a secure area, inaccessible to inmates?

Finding: Inmates were observed in different tool room areas throughout Complex without direct supervision. Some of these areas included welding shop, Fire safety cage and work crew trailers. DO 712.01, 1.1

2. Are tools stored on a shadow board with shadow closely resembles the tool?

Finding: In various areas throughout Complex, it was observed there are tool storage areas where the tool shadow board does not closely match the shape of the tool stored on the shadow board for that area. DO 712.02, 1.4.1

3. Are tools being signed out/in appropriately on the correct form? (Tool Check out Form 712-4)

Finding: K-9 staff do not sign out tools assigned to the kennel area. Inmates assigned to work crew #1 were signing out tools to themselves from the work crew #1 tool trailer. DO 712.02, 1.5.1.1.1

4. Are the completed Tool Check Out Forms (712-4) kept on file in the tool room for the previous thirty days?

COMPLEX

Finding: Motor pool staff only had 18 days of tool check out forms on hand for the month of February. DO 712.02, 1.2.1.2

5. Did the person responsible for tool control ensure all tools were accounted for at the beginning and ending of the shift??

Finding: K-9, Maintenance, waste water, welding shop and motor pool and work crew supervisors do not keep a service journal to document tools being accounted for at the beginning or end of the shift. DO 712.02, 1.2.3.3

6. If there was a tool unaccounted for, was appropriate action taken?

Finding: Tool trailer for work crew #1 has a missing garden hoe not accounted for. There is no tool inventory showing the correction or a chit to show it is out for service. Officers assigned to the crew were not able to speak of the missing garden hoe. DO 712.02, 1.8

7. Observe posted inventory sheets. Compare inventory with stored tool. Is the inventory accurate?

Finding: Class A drill bits 8477 and 8046 do not match number on Master tool inventory. DO 712.02, 1.2.3.1

8. Did the officer ensure all appropriate documents were completed?

Finding: Tool room officer did not update the Master tool inventory to reflect the proper number of drill bits in the class A tool area. DO 712.02, 1.2.1.6

9. Are all tools permanently engraved/stamped and color-coded using the applicable units assigned color?

Finding: Not all tools were observed to be color coded in the main tool room throughout all sections 1000-8000. Not all observed tools have the same black paint to color code the tool. In the main tool room, there were orange colored tools. In the Maintenance vehicles, there were tools color coded black, red, and yellow. In addition, not all tools were engraved. In the welding room, there were some tools not engraved and with different color codes. The key control tools were color coded yellow. The color designation for Complex tools is black. DO 712.02, 1.2.1.5

10. Is the tool control officer is the only staff who permanently engraves/stamps and color-codes tools.

COMPLEX

Finding: Using a tool engraver which is assigned to the motor pool, the motor pool staff stated that when they break a tool, they take it off site to exchange it for a new replacement tool at a local retailer. The motor pool staff further stated that when they return to the Complex with the new tool, they engrave the tools themselves. New tools from motor pool are not received through the Complex tool room for proper engraving. DO 712.02, 1.2.1.5

11. Are all tool inventories logged into the appropriate Correctional Service Journal by those staff who conducted the inventories?

Finding: Maintenance, K-9, waste water, weld shop, work crews #1 and #2 and motor pool staff do not document inventories in the service journals. Those areas do not report to the Complex tool room officer to advise all tool inventories are accounted for. DO 712.02, 1.2.3.3

12. Are all shadow boards clean and clearly marked with silhouettes closely mirroring the tools to allow for easily visual inspection and inventories?

Finding: In various areas throughout Complex, including main tool room, water treatment plant, motor pool, maintenance and tool trailers for crews #1 and 2, it was observed there are many areas where the tool shadow does not closely match the shape of the tool. Complex tool room Grinder and wheel barrels are not properly shadowed. Waste water treatment plant wheel barrel, pant bibs, and paint brushes are not shadowed. Motor pool gloves are improperly shadowed. Tool trailer #1 shovels are not properly shadowed. Work crew #2 trailer has 2 trench shovels present which are not shadowed. DO 712.02, 1.4.1

13. If a tool is removed for repair, is a chit with the tool number placed on the shadow board?

Finding: Tool trailer for work crew #1 was observed not using chits when tools are removed for repair. DO 712.02, 1.4.3

14. If a tool is removed permanently, is the shadow board updated immediately?

Finding: Work crew #2 trailer displays a shadow for a spade shovel which is neither present or on the inventory sheet. DO 712.02, 1.4.2

15. Are portable explosive or air driven tools prohibited for inmates to check-out and instead only issued to staff?

COMPLEX

Finding: Motor pool staff checked out air driven tools on the tool check out forms directly to inmates who are assigned to work in the motor pool, not to the inmate supervisor. DO 712.02, 1.5.3

16. Does a file exist in the institutions warehouse that has each products name, date received, quantity received and list of trained staff to use each product?

Finding: No MSDS sheet for blue toilet cleaner were found at the Cibola unit. When asked about this, OSC III Duffy stated he was not aware of this product. DO 712.05, 1.2.4

WEAPONS

1. Interview the Senior Firearms Instructor and ask him/her if they have a list of CO's by unit who have not qualified with at least the service handgun and shotgun and familiarized with the gas gun.

Finding: Lt Baird, Senior Firearms Instructor, does not maintain a current list of COs who have not qualified with the service handgun and shotgun and are not familiar with the gas gun. DO 510.01, 1.1

2. Is there a list of employees, other than those in the Correctional Officer Series, who need to be qualified? If so, are these employees identified and approved by the Complex Warden?

Finding: Lt. Baird, Senior Firearms Instructor does not have a list of non-CO series employees who need to be qualified. If someone wants to qualify, he receives an email from the employee's supervisor and schedules them for the range. He does not channel the request through the Warden's office. DO 510.01, 1.3

3. Review all instructor files. Did all Firearms Instructors meet the minimum requirements during the application process?

Finding: Lt. Baird, Senior Firearms Instructor, and CO II Reardon, Firearms Instructor, do not have a current certification in CARE on file. DO 510.02, 1.1.5 - 1.1.5.9

4. Did all Firearm Instructors meet the requirements during the certification process?

Finding: A review of five firearms instructor files indicates one file is missing the Firearms Instructor Application 510-10 form. DO 510.02, 1.2.5 - 1.2.6

COMPLEX

5. Review the training records of the current Firearms Instructors; have they have completed the Qualification/Re-qualification Firearms course and a Chemical Agents Familiarization class annually?

Finding: The review of five firearms instructors files revealed they do not contain documentation to verify attendance of a Chemical Agent Familiarization class since 2006. DO 510.02, 1.3.3

6. Review the training records of the current Senior Firearms Instructors to determine if they have completed the Qualification/Re-qualification Firearms course, Chemical Agents Familiarization and Use of Force class annually.

Finding: The review of Lt. Baird's Senior Firearms Instructor file revealed it does not contain documentation to verify attendance of a Chemical Agent Familiarization class since 2006. DO 510.02, 1.1.2

7. Does the Senior Firearms Instructor complete annual evaluations and maintain individual files on each of the Firearms Instructors?

Finding: A review of the firearms instructor files indicated the annual evaluations are not being completed nor are records being maintained for each instructor. DO 510.04, 1.2.2

8. Review the CCW logs. Are all records up to date, and include staff who stored weapons on-site the date of the inspection?

Finding: Two Officers (Moreno - 2/6 & Price - 2/13) did not sign the log when they retrieved their weapons and Officer (Danbeck - 2/4) only entered his name on the log. DO 510.06, 1.5.4.1

REQUIRED SERVICES

1. Is outgoing inmate mail stamped on the front of the envelope with a commercial stamp reading "Inmate Mail Arizona Department of Corrections"?

Finding: Not all outgoing mail was not stamped, labeled or otherwise marked "Inmate Mail Arizona Department of Corrections". Envelopes are preprinted however, post cards and packages are not marked with either a preprinted stamp or use of a commercial stamp. DO 914.05, 1.1.4

CHEYENNE UNIT

CLASSIFICATION

1. Review DI95 screen for C0301 and C0401 appointments. Are any out of date?

Finding: C03 appointment out of time frames (Sanchez 201697) DO 801.04, 1.2.3

COUNT MOVEMENT

1. Does the shift supervisor or commander review and sign all formal count sheets?

Finding: The Cheyenne Unit count sheets being used for count at 1100 hours included the count for 0400 on 02/14/2011. The graveyard supervisor had not signed the count sheets after the 0400 count had cleared on any of the count sheets being used on the unit for the 1100 count. DO 701.04, 1.4

INGRESS/EGRESS

1. Does the officer consistently inspect incoming property for possible contraband?

Finding: Staff store items were brought in to the unit and were not required to be brought through the scanner or to be physically searched. DO 513.01 1.4

2. Is the assigned officer aware of items which constitute prohibited personal property, such as cellular phones, and hand cuff keys?

Finding: Staff working in the lobby were unaware inspections staff on "travel status" were able to bring in more than \$20. DO 513.01, 1.6.7.2

3. Are all staff entering the unit required to pass through a metal detector while being observed by the assigned officer?

CHEYENNE UNIT

Finding: Staff working the lobby were not watching the incoming staff clear the metal detector. The staff were too involved in checking the personal property. DO 708.02, 1.1.6

4. Evaluate procedure for inspecting food items staff members are attempting to introduce to the unit. Does the unit procedure provide clear guidelines for assigned staff?

Finding: The Post Order does not provide any guidelines for the inspection of food items or their need to be carried through the metal detector. DO 513.02, 1.5

5. Do assigned staff members inspect / search all personal property to include food items, and require applicable items to be carried through the metal detector by the owner?

Finding: Food items were not required to be carried through the metal detector. DO 513.02, 1.5

KEYS / RADIOS

1. Does the unit have an accurate Master Key Inventory * Review Master Key Inventories and associated documentation for past 12 months.

Finding: There were 3 keys observed in key control office which were not on a key ring, tagged, or on the Master Inventory. Key control officer Hall did not know of their existence nor what they were to or when the keys were placed there. He stated this was the first time he had seen the keys. There was no IR to explain the keys being there. The keys were later found to belong to CDU. DO 702.02, 1.1

2. Does the inventory match up with existing key stock on hand? Compare inventory with available keys.

Finding: Inventory of existing key stock does not match up with the Master key inventory. There were 3 Brink 301 keys in the key control room which were not accounted for and not on the Master inventory. Key control officer Hall stated he did not know when or why they were placed there or what they were to. DO 702.02, 1.1

3. Do key sets have attached tags with key ring number, and number of keys? Review a random sampling of key rings.

CHEYENNE UNIT

Finding: Inventory of existing key stock downs not match up with the Master key inventory. There were 3 keys in the key control room which were not accounted for and not on the Master inventory. They were Brink 3021 keys. Key control officer Hall stated he did not know when they were placed there, what they were or were for or why they were placed there. DO 702.02, 1.1

4. Is a Locksmith Work Order, Form 702-6 used when repair or replacement of key/key rings are required?

Finding: The form 702-6 is not used. Key control officer Hall uses form 403-2. DO 702.02, 1.2.2.1

5. Each time a key set is issued, or returned does the officer responsible make the appropriate entry in the Key and Credit Card Control sheet (Form 702-1) specifying at a minimum: Key number, date of issue/return, name of authorized staff member, initial?

Finding: Not all entries are made in all sections. The main observed discrepancy is missing information in the section specific to the key being returned. DO 702.02, 1.4.1.2

6. If the unit has any permanently assigned keys is a Receipt of Permanent Issue Keys form 702-5 being used?

Finding: Staff are issued permanent keys for personal lockers. The staff do not complete form 702-5 for the key. Instead, they complete a unit generated memo showing they are assigned a permanent key for the unit. DO 702.02, 1.5.1

7. Are staff members maintaining control of keys signed out to them in their personal possession and control at all times and not left in office desks or other office storage areas?

Finding: Medical staff were observed leaving their office area with their assigned keys left on a table and unattended. This was also observed by Sgt. Rose and the medical officer. DO 702.02, 1.5.2

8. If the pharmacy or medical unit maintains keys are they kept in compliance with policy?

Finding: Medical staff were observed leaving their office area with their assigned keys left on a table and unattended. This was also observed by Sgt. Rose and the medical officer. DO 702.02, 1.5.2

CHEYENNE UNIT

9. Does the Key Control Officer have written approval which demonstrates the Warden or designee approves of all key duplication in written format?

Finding: Key control officer Hall was asked for written approval of key duplication and was not able to produce any documents granting permission and could not speak to this question. DO 702.03, 1.1

10. Are the names of both employees logged in the Correctional Journal?

Finding: The Main control officer did not log into the service journal when the emergency key box was accessed during the inspection, or that any emergency keys were removed or replaced. DO 702.04, 1.4.2

11. Is there a current Institutional Order addressing the procedural requirements for emergency Key Control?

Finding: Institutional Order on site was outdated and signed by Ivan Bartos on 6-15-2004. Key control officer Hall was not able to demonstrate knowledge of any updated Institutional Order. IMPLEMENTATION

12. Are the radios serviceable and being utilized properly i.e. use of call signs, clear transmissions, no unnecessary conversation?

Finding: Radio call signs or codes were not observed as being regularly used. DO 104.06, 1.1.8

PERIMETERS / TOWERS

1. Medium custody units-If the system has perimeter lighting, are all applicable lights operating, with no sign of visible damage, or wear?

Finding: While conducting an inspection of the Vindicator alarm system, it was noted one of the quartz lights on the north side of the perimeter would not come on when the zone was activated. It was reported the light had been reported as a security device deficiency prior to the inspection. TM 3.1.5.1.2

SECURITY DEVICES

1. Were appropriate entries made in the Correctional Service Journal?

Finding: Entries were inconsistent, did not include IR #s or action taken and were not carried over shift to shift. (DO 703.01, 1 1.2)

CHEYENNE UNIT

2. Has the unit / complex Chief of Security generated a canned statement which demonstrates a consistent approach to documenting security device inspections by all security staff throughout the unit / complex?

Finding: There is a canned statement in the post order but it is not consistently used to document SDIs. (DO 703.01, 1.3)

3. Does the Chief of Security maintain a current file of all documentation relating to inspections, maintenance requests, follow-up actions, and preventive maintenance programs within the institution/unit?

Finding: The log does not include the follow-up actions taken when an SDI deficiency is reported when it is repaired regardless of the timeframe. HU 7 Control Panel was repaired but was still on the log as unrepaired. (DO 703.01, 1.1.3)

4. Does the Chief of Security ensure SDI work order log repairs are made within time frames?

Finding: SDIs have been found to have not been repaired from May 2010 to Sept 2010. (DO 703.01, 1.4.4)

TOOLS

1. Are tool stored in a secure area, inaccessible to inmates?

Finding: Wheel barrows outside of the tool room were observed unsecured. The cable which secures them was not locked, or ran through the legs of the tools to keep them in place. Inmates were around the tool room. DO 712.01, 1.1

2. Are flammable / hazardous items stored within storage areas which comply with fire and safety codes?

Finding: There was spray paint stored in a non flammable cabinet in the key control office with no observed MSDS available. DO 712.05, 1.1.4

3. Are inventory sheets placed in all areas where tools are stored within the authorized location?

Finding: There were no observed inventory sheets located where the lawn mowers were stored. DO 712.02, 1.2.1.4

CHEYENNE UNIT

4. Are unserviceable tools removed, and new tools added to the master inventory using the Tool Disposition (Form 712-6)?

Finding: Tool room officer Villafana stated he had broken drill bits over a week ago. The drill bits were still in the drill index. There was no Information Report written or Tool Disposition form completed. They were also still listed on the Master tool inventory. DO 712.02, 1.2.1.6

5. Are unserviceable tools disposed of appropriately, as prescribed in D.O. 304 Equipment and Inventory System?

Finding: Unserviceable tools are still on inventory. DO 712.02, 1.2.1.6

6. Are Class A tools issued and utilized under staff supervision, at all times?

Finding: Class A hose was issued to inmate Hudson on tool check out form. This same inmate was later observed with the water hose walking on the yard without any observed supervision. DO 712.02, 1.3.1.1

7. Are all shadow boards accessible to inmates stored behind a secure barrier of expanded metal, or like material, with the entryway secured with a locking device?

Finding: Inmates were around a storage area that had wheel barrows not secured behind a secured barrier. DO 712.02, 1.4.4

8. Evaluate the after hours tool check out procedure for the unit. Do staff access the tool room, check out tools, and return the tools as per existing unit tool control procedures?

Finding: A review of 30 day tool check out forms revealed after hours staff do not sign in or complete the tool check out form. DO 712.02, 1.5.1.1.1

9. Where medical tools cannot be engraved, is the serial number used for identification?

Finding: No serial numbers were used to identify un-engraved tools. Only a description of the tool was used. DO 712.03, 1.2.2

10. Are updated MSDS sheets found at all storage locations, for all products found inside the storage site?

CHEYENNE UNIT

Finding: Spray paint cans were located inside a cabinet in the tool control office. There were no MSDS sheets available for viewing from the tool room officer. DO 712.05, 1.1.4

11. Are all restricted products issued from a central warehouse / storage location, where the products are inventoried using a gross maximum weight protocol?

Finding: Powdered bleach was found in the units vehicle sally port with no inventory form. The units storage area for restricted product is located inside of the unit not at the sally port. DO 712.05, 1.2.1

WEAPONS

1. Are staff members who are checking the seal on the DART locker at the beginning of each work shift and its condition documenting their findings in a Correctional Service Journal?

Finding: Log entries do not include the condition of the seal. (DO 716.06, 1.6.2.1)

DETENTION SERVICES

1. Inspect detention facility (including cells). Is the area clean and sanitary?

Finding: Porters closets were dirty. (Mops on floor not hung up, 6-12 dirty towels on the floor, mop bucket had dried dirt in the corners and there was dirt and debris .5 to 1 inch thick on the floor.) Four of ten cells observed where needing to be cleaned. CO II Franco and CO II Mora where in attendance during the inspection. DO 804-01, 1.2.6

2. Observe a sanitation inspection during a shift. Are all areas in the unit inspected during the shift?

Finding: Inspections were not being conducted during shift which was evident by the amount of fishing lines, items on the wall and plastic bottles of water on the floor. CO II Franco and CO II Mora where in attendance during the inspection. DO 804-01, 1.9

3. Interview staff on procedures in response to an inmate suicide situation. Are guidelines followed?

CHEYENNE UNIT

Finding: When COII Mora, Franco and Juarez were interviewed, no one knew the procedures or guidelines to follow in response to an inmate suicide situation. DO 807.03, 1.1, and 1.2

4. Review historical records for proper documentation. Does the record indicate staggered observation times within the required time frames to include at shift change?

Finding: When observation records from 1/1/11 through 2/15/11 were reviewed, there were several instances when times were not staggered. DO 807.05, 1.2.6

5. Review historical records for proper documentation. Does the record indicate staggered observation times within the required time frames to include at shift change?

Finding: Reviewed I/M Sabir, Ten Minute Watch, Jan 23-25, 2011. Observation times were not staggered. DO 807.05, 1.3.4

6. Review the records; has the mental health care staff or medical health care staff conducted daily evaluations as required?

Finding: Reviewed I/M Sabir, Ten Minute Watch, Jan 23-25, 2011. There was no record of mental health care or medical health care staff conducting daily evaluations. DO 807.05, 1.3.6

7. Are new forms (Mental health Disposition and Observation Record) initiated when changes are made in a watch status?

Finding: Reviewed I/M Sabir record of mental health care or medical health care staff conducting daily evaluations.; The observation record was changed from a Continuous Watch then to a Ten Minute Watch without being documented on a new Mental Health Disposition Form. DO 807.05, 1.12

8. Are the completed Observation Records submitted for the shift commander's signature at the end of every shift?

Finding: Reviewed 53 Observation Records with Lt. McCormick. 28 were not signed by the shift commander. DO 1103.07, 1.4.2

9. Are security staff documenting a visual check of the inmate every thirty minutes or as otherwise specified by the mental health watch order?

CHEYENNE UNIT

Finding: Security staff are not staggering their visual checks on the Observation record as ordered on the mental health watch order. DO 1103.07, 1.8.5

INMATE SERVICES

1. Does the Unit have a Post Order #43 Urinalysis Security Officer?

Finding: Capt. Thompson stated the unit does not have Post Order #43 Urinalysis Security Officer. (No Policy Reference)

INMATE MANAGEMENT

1. Are Class C Violations disposed of within five work days of the filing date of the violation?

Finding: Sgt. Ruiz indicated Class C Violations are disposed of within 7 work days. DO 803.05, 1.1.1

2. If any cases which have been dismissed are located during the review, review the inmate file, AIMS file. Have all references of the dismissed case been removed from the inmate file and AIMS?

Finding: In review of AIMS screen DI46, at the time of inspection I/M Mondragon's file, # 136718F, indicated a guilty charge even though the case had been dismissed. DO 803.10, 1.2

REQUIRED SERVICES

1. If the sender cannot be verified, does the inmate receive a notice and the mail held for 90 days before it is destroyed?

Finding: COII Carlon stated unverifiable mail is held for 30 days and then destroyed. DO 914.02, 1.3

CHEYENNE UNIT

2. Did receiving unit sign for inmate's property?

Finding: Of the 1% reviewed files, two had no signatures in the received column. DO 909.05, 1.10

3. Is the inmate's ADC number engraved on the television in 2 visible locations?
Are all other appliances in 1 visible location?

Finding: ADC numbers on two observed televisions had only one set of engraved numbers. When COII Carlon was questioned he advised he only engraves one location. DO 909.06, 1.4.4

4. Are property files maintained in terminal digit order?

Finding: Property files are stored in numerical order using the first three ADC numbers. DO 909.10, 1.7

CIBOLA UNIT

CLASSIFICATION

1. Does a staff member initiate the reclassification on the DI61 AIMS screen upon approval from the Deputy Warden or designee?

Finding: For I/M Scrivner 213720, no DI 61 entries had been created yet during the time of the inspection. DO 801.04, 1.2.4

2. Does a Correctional Officer IV assign inmates to Education, Treatment and Work Based Education (WBE) programs in accordance with the inmate's individual Corrections Plan, the applicable facility priority ranking report(s) and actual vacancies in work assignments?

Finding: COIV did not use Corrections Plans or priority ranking report for assigning inmates. DO 903.03, 1.1.2

FOOD SERVICE

1. Review Correctional Service Journal entries relating to inspections of kitchen workers. Do the entries for inmates not meeting requirements noted by inmate name and ADC #?

Finding: In review of Correctional Journal dated 2/23/11, all inmates met requirements. However, when Officer Urquijo was asked what kind of documentation is done, he could not speak to the question. TM 912.01, 1.1.3.1

2. Are inmates on approved Restricted Diets being fed separately from the general population?

Finding: Mr. Cunanan indicated inmates on restricted diets are served with the general population. TM 912.07, 1.1

INGRESS/EGRESS

1. Does the assigned officer question each person attempting to enter the unit in regard to possession of contraband items?

Finding: Sergeant Herreara on swing shift was allowed to bring in a large black bag which was neither clear or mesh. DO 513.01, 1.6.1.4

CIBOLA UNIT

2. Does the officer consistently inspect incoming property for possible contraband?

Finding: Staff working the lobby did not inspect Jackets at the ingress point. DO 513.01, 1.4

3. Are all staff entering the unit required to pass through a metal detector while being observed by the assigned officer?

Finding: The cart holding the mail was not inspected when rolled through the scanner by the Mail and Property officer. DO 708.02, 1.1.6

4. Evaluate procedure for inspecting food items staff members are attempting to introduce to the unit. Does the unit procedure provide clear guidelines for assigned staff?

Finding: Visitation Post Order does not provide any guidelines for the inspection of food items or their need to be carried through the metal detector. DO 513.02, 1.5

5. Do assigned staff members inspect / search all personal property to include food items, and require applicable items to be carried through the metal detector by the owner?

Finding: Food items were not required to be carried through the metal detector. DO 513.02, 1.5

KEYS / RADIOS

1. Does the inventory list the number of keys available for each lock/locking device?

Finding: The key control officer Gilg does not list the number of available keys for each lock or locking device on the Master key inventory. DO 702.02, 1.1.3

2. Does the unit have a monthly report on file showing the inspection and inventory of keys/key rings, emergency keys/key rings and locking devices?

Finding: The monthly reports do not show which month the keys were inspected. All reports have the same date on them. Key control officer Gilg stated he does not change the report unless there is a change to be made with a key so he uses the same report each month. DO 702.02, 1.2.2

CIBOLA UNIT

3. Are the names of both employees logged in the Correctional Journal?

Finding: Main control officer did not log into the service journal the emergency key box was accessed during the inspection or any emergency keys were removed or replaced. DO 702.04, 1.4.2

4. Are all manufacturer numbers removed from each emergency key so as to not identify the key?

Finding: Key set E5 key A has E577 still on the key and the manufacturer number has not been ground off or removed. DO 702.04, 1.8

PERIMETERS / TOWERS

1. Medium Custody units- Do the lights in the adjacent zones to either side of the alarmed zone activate when an alarm condition triggers the quarts lights associated with the alarmed zone? Interview random staff assigned to the control room to determine action taken when an alarm is activated. (Ensure lights are not program to prevent activation during daylight hours. Also ensure adjacent zones are programmed to come on during dark hours, if applicable.)

Finding: Zone 17 of the Cibola perimeter fence shaker wire would not alert during the inspection and would not activate the corresponding quartz lights. TM 3.1.5.12

SECURITY DEVICES

1. Were appropriate entries made in the Correctional Service Journal?

Finding: Entries did not include description of problem and was not identified as a Security Device deficiency. (DO 703.01, 1 1.2)

2. Has the unit / complex Chief of Security generated a canned statement which demonstrates a consistent approach to documenting security device inspections by all security staff throughout the unit / complex?

Finding: The statement in the Post Order does not match the requirements of the Institutional Order, and staff are inconsistently logging SDIs. (DO 703.01, 1.3)

3. Does the Chief of Security maintain a current file of all documentation relating to inspections, maintenance requests, follow-up actions, and preventive maintenance programs within the institution/unit?

CIBOLA UNIT

Finding: The SDI file documentation does not include follow-up actions. (DO 703.01, 1.1.3)

4. Does the Chief of Security ensure SDI work order log repairs are made within time frames?

Finding: Log entry dated 2/9/11 - lock on 530A broken - no follow-up action documented. (DO 703.01, 1.4.4)

TOOLS

1. Are tool stored in a secure area, inaccessible to inmates?

Finding: Tool room was observed by B.A. Kyle Fouts, ASOII Lewis and Lt. Wyrick as being open and not secure. There was an inmate who exited the tool room with no security staff present. DO 712.01, 1.1

2. Observe posted inventory sheets. Compare inventory with stored tool. Is the inventory accurate?

Finding: Drill bit sets do not have engraved #'s on each tool. The tool box itself has "71 pieces" engraved on the box. The Master inventory reports there are 65 pieces assigned to the tool box. DO 712.02, 1.2.3.1

3. Did the officer ensure all appropriate documents were completed?

Finding: Tool room officer Worthen did not update the Master tool inventory to reflect the proper number of observed drill bit set discrepancies. DO 712.02, 1.2.1.6

4. Are all tools permanently engraved/stamped and color-coded using the applicable units assigned color?

Finding: Socket sets, fans and level are not engraved. Tile saw belonging to AWC/WBE is not color coded. DO 712.02, 1.2.1.5

5. Is the tool control officer is the only staff who permanently engraves/stamps and color-codes tools.

Finding: Tool control officer Worthen stated the warehouse porters / clerks engrave class A and B tools. DO 712.02, 1.2.1.5

CIBOLA UNIT

6. Are Class A tools issued and utilized under staff supervision, at all times?

Finding: An inmate was observed by two auditors and unit Lieutenant Wyrick in the tool room unsupervised. The A and B sections were both unsecured. DO 712.02, 1.3.1.1

7. Are all shadow boards accessible to inmates stored behind a secure barrier of expanded metal, or like material, with the entryway secured with a locking device?

Finding: Class A and B tool areas were observed unsecured with no security staff present in the area. As Lt. Wyrick and two auditors arrived at the tool room area, an inmate was observed in the tool room and exiting the tool room. DO 712.02, 1.4.4

8. Is the tool room storage area considered a restricted location where inmates are not allowed to be assigned to work?

Finding: Class A and B tool areas were observed being unsecured with no security staff present in the area. As Lt. Wyrick and two auditors arrived at the tool room area, an inmate assigned as a clerk to the warehouse was observed in the tool room and was exiting the tool room. DO 712.02, 1.5.2

9. Are updated MSDS sheets found at all storage locations, for all products found inside the storage site?

Finding: There was a Portable Toilet Treatment found in the warehouse/tool room area. Later when speaking with OSC II Duffy, he stated he did not have a copy of the MSDS sheet for this product and was not aware they were "servicing their own toilets". DO 712.05, 1.1.4

10. Are restricted products controlled by limiting access to staff only, and securing the products at all times when not in use?

Finding: Restricted products are not controlled on-site. The products are stored in the area adjacent to the tool room, still in the manufactures boxes stacked against the wall and not secured. During the inspection, it was observed by two auditors and Lt. Wyrick the warehouse and tool room area was left unsecured with no staff member present. An inmate was observed in the warehouse and tool room and was leaving the area where restricted products were being stored. DO 712.02, 1.2

CIBOLA UNIT

11. Does a file exist in the institutions warehouse which has each products name, date received, quantity received and list of trained staff to use each product?

Finding: No MSDS sheet for blue toilet cleaner. DO 712.05, 1.2.4

INMATE MANAGEMENT

1. Do staff members respond to inmate letters using an Inmate Letter Response, Form 916-2, which is available on the ADC Net within 24 hours on issues deemed as an emergency?

Finding: When CO IV Warren was asked this question, he indicated issues deemed an emergency require a 3 day response time. DO 916.03, 1.4.1

2. Do staff members ensure that any issue raised by an inmate for which there is an alternative method of correcting, the issue is correctly dealt with by the inmate?

Finding: When asked CO IV Warren what other alternative methods exists, he could not speak to this. DO 916.03, 1.4.2

3. Is appropriate action taken when an inmate abuses the grievance system?

Finding: COIV Warren was asked this question and could not speak to it. DO 802.07, 1.2.1.1-1.2.2

4. Did the Grievance CO IV coordinator conduct an adequate investigation of the property loss claim during the grievance process?

Finding: When asked how property loss claims are handled, CO IV Warren could not speak to this. DO 909.09, 1.2-1.2.2, 1.4-1.4.3

5. If the sanctions include revocation of a suspension, does the Disciplinary Hearing Officer complete the appropriate documentation?

Finding: When asked how a revocation of suspension is handled, Sgt. Cruz could not speak to this. DO 803.08, 1.6-1.6.3

REQUIRED SERVICES

1. Of the files reviewed, does every 911-1 have the potential visitors full name, date of birth, address, phone number and relationship filled out?

CIBOLA UNIT

Finding: Of the 1% reviewed files, four were missing phone numbers and social security numbers on form 911-1 DO 911.01, 1.1.2

2. Are applications stamped "Received" including the date on the reverse side?

Finding: Of the 1% of the reviewed files one application was missing the received stamp. Cibola received the application. DO 911.01, 1.3.1

3. Are they approved only by the Deputy Warden?

Finding: Documentation shows ADW Bayless is the approving authority for special visits. DO 911.05, 1.7.1

4. Did receiving unit sign for inmate's property?

Finding: Of the 1% of the reviewed files five files had no signatures in the received column. DO 909.05, 1.10

COCOPAH UNIT

CLASSIFICATION

1. Does the CO IV ensure inmates have the opportunity to attend GED after functional literacy is earned and space is available in the class?

Finding: Per COIII Higgins, teachers are deciding who is enrolled in the classes. DO 903.02, 1.3.1.1.1

2. Does a Correctional Officer IV assign inmates to Education, Treatment and Work Based Education (WBE) programs in accordance with the inmate's individual Corrections Plan, the applicable facility priority ranking report(s) and actual vacancies in work assignments?

Finding: Per COIII Higgins, the teachers of the respective classes decide who is enrolled. DO 903.03, 1.1.2

COUNT MOVEMENT

1. Does the shift supervisor or commander review and sign all formal count sheets?

Finding: The shift supervisors at the Cocopah Unit do not sign the counts sheets utilized at any Formal Count. The Shift Supervisors only sign a copy of the cover sheet utilized for clearing the count. DO 701.04

FOOD SERVICE

1. Review Correctional Service Journal entries relating to inspections of kitchen workers. Do the entries for inmates not meeting requirements noted by inmate name and ADC #?

Finding: When asked what happens when an inmate has open sores, Officer Simpson indicated the inmate would not be allowed to work, and medical would be notified. However, he could not speak to how this issue would be documented in the correctional journal. TM 912.01, 1.1.3.1

INGRESS/EGRESS

1. Evaluate procedure for inspecting food items staff members are attempting to introduce to the unit. Does the unit procedure provide clear guidelines for assigned staff?

COCOPAH UNIT

Finding: The Post Order does not provide any guidelines for the inspection of food items or their need to be carried through the metal detector. DO 513.02, 1.5

2. Do assigned staff members inspect / search all personal property to include food items, and require applicable items to be carried through the metal detector by the owner?

Finding: Food items were not required to be carried through the metal detector. DO 513.02, 1.5

KEYS / RADIOS

1. Is a Locksmith Work Order, Form 702-6 used when repair or replacement of key/key rings are required?

Finding: Key control officer Garcia stated he uses a memo to request a new key instead of the required 702-6 form. DO 702.02, 1.2.2.1

2. Are the names of both employees logged in the Correctional Journal?

Finding: Main control officer did not log into the service journal the emergency key box was accessed during the inspection or any emergency keys were removed or replaced. DO 702.04, 1.4.2

3. Are all manufacturer numbers maintained in the master key inventory?

Finding: Manufacturer numbers are not maintained in the Master key inventory. DO 702.04, 1.8

SECURITY DEVICES

1. Has the unit / complex Chief of Security generated a canned statement which demonstrates a consistent approach to documenting security device inspections by all security staff throughout the unit / complex?

Finding: The statement in the Post Order does not match the requirements of the Institutional Order. (DO 703.01, 1.3)

2. Does the Chief of Security maintain a current file of all documentation relating to inspections, maintenance requests, follow-up actions, and preventive maintenance programs within the institution/unit?

COCOPAH UNIT

Finding: The follow-up actions taken from when an SDI deficiency is reported to when it is repaired are not documented. (DO 703.01, 1.1.3)

TOOLS

1. Has the Chief of Security ensured a monthly reconciliation has been conducted of all authorized Tool Control Storage areas?

Finding: Master tool inventory was not correct from 10/2010 until 01/2011 indicating the Chief of Security was not reconciling the Master tool inventory on a monthly basis. There was no individual inventory sheets observed for each barber box. DO 712.02, 1.2.3.2

2. Are tool stored in a secure area, inaccessible to inmates?

Finding: Tool room officer Lopez stated he has a clerk, (I/M Banelly) who cleans the tool room and helps account for the tools. Lopez stated the inmate conducts the initial count of all tools and he conducts the end of the day inventory. DO 712.02, 1.5.2

3. Are tools stored on a shadow board with shadow that closely resembles the tool?

Finding: Gloves are not shadowed in the shape of the glove. They are shadowed with a square much larger than the gloves stored there. Hedge trimmers are shadowed with a shape of a triangle. Not all observed silhouettes match the shape of the tool stored in place. There were also round and square shovels observed stored on the same hook. DO 712.02, 1.4.1

4. Are inventory sheets placed in all areas where tools are stored within the authorized location?

Finding: Inventory sheet for outside tool room is not stored with the tools but kept in the main tool room. DO 712.02, 1.2.1.4

5. Observe posted inventory sheets. Compare inventory with stored tool. Is the inventory accurate?

Finding: Tools do not match the posted inventory sheet. Paint roller removed 10/2010 per the inventory sheet. 11/2010 inventory did not list any paint rollers. 1/2011 inventory listed 3 paint rollers. Physical inventory showed 4 rollers in place. DO 712.02, 1.2.1.5

COCOPAH UNIT

6. Did the officer ensure all appropriate documents were completed?

Finding: Tool room officer Lopez did not update the Master tool inventory to reflect the proper number of observed paint roller tool discrepancies. DO 712.02, 1.2.1.6

7. Are all tools permanently engraved/stamped and color-coded using the applicable units assigned color?

Finding: There were 2 sewing machines and a pair of 4 inch scissors in the mail and property room not engraved or color coded. DO 712.02, 1.2.1.5

8. Does the Chief of Security or designee reconcile the Master Tool Inventory on a monthly basis?

Finding: Master tool inventory was not correct from 10/2010 until 01/2011 indicating the Chief of Security was not reconciling the Master tool inventory on a monthly basis. There were no individual inventory sheets observed for each barbers box. DO 712.02, 1.2.3.2

9. Are all shadow boards clean, and clearly marked with silhouettes closely mirroring the tools to allow for easily visual inspection and inventories?

Finding: Gloves are not shadowed in the shape of the glove. They are shadowed with an oversized square larger than the gloves. Hedge trimmers are shadowed with a shape of a triangle. Not all observed silhouettes match the shape of the tool stored in place. There were also round and square shovels observed stored on the same hook. DO 712.02, 1.4.1

10. Is the tool room storage area considered a restricted location where inmates are not allowed to be assigned to work?

Finding: Tool room officer Lopez stated his assigned I/M clerk (Banelly) cleans the tool room and helps account for the tools. Lopez stated the I/M conducts the initial count of all tools and he conducts the end of the day inventory. DO 712.02, 1.5.2

11. Where medical tools cannot be engraved, is the serial number used for identification?

Finding: No serial numbers were used to identify un-engraved tools. Only a description of the tool was used. DO 712.03, 1.2.2

COCOPAH UNIT

12. Are tools, and instruments in long term storage sealed in tamper proof containers, locked with a break away seal, and the seals checked daily by staff responsible for conducting inventories?

Finding: In medical, break away seals were not used for tool stored in long term storage which was sealed in tamper proof containers. DO 712.03, 1.4.5

13. Are there clearly marked "sharps" disposal units located within the health services areas, which are considered tamper proof, and not accessible by inmates?

Finding: Disposable sharps units are not considered tamper proof. The medical staff stated they empty the containers into the bio hazard containers when they are full and reuse the containers. DO 712.03, 1.4.8

14. Are updated MSDS sheets found at all storage locations, for all products found inside the storage site?

Finding: There was no MSDS sheet found on site for Assure liquid pre-soak and silver detarnisher. DO 712.05, 1.1.4

INMATE MANAGEMENT

1. If the sanctions include revocation of a suspension, Does the Disciplinary Hearing Officer complete the appropriate documentation?

Finding: When asked how a revocation of suspension is handled, Sgt. Vazquez could not speak to this. DO 803.08, 1.6-1.6.3

REQUIRED SERVICES

. Are applications stamped "Received" including the date on the reverse side?

Finding: Of the 1% reviewed files, one application was missing the received stamp. DO 911.01, 1.3.1

1. Is the visitation schedule posted in the registration, visitation and inmate housing areas?

Finding: There were no Visitation Schedules posted in the inmate housing unit. The billboard had only the housing requirement pictures and the meal calendar. DO 911.10,

COCOPAH UNIT

2. Did receiving unit sign for inmate's property?

Finding: Of the 1% of reviewed files, one had no signatures in the received column. DO 909.05, 1.10

DAKOTA UNIT

CLASSIFICATION

1. Review DI95 screen for C0301 and C0401 appointments. Are any out of date?

Finding: One entry was out of time frames at Deputy Warden/Unit Administrator's level (Mexia-Soto 223634). DO 801.04, 1.2.3

2. Does the CO IV supervising the Classification officer review all actions taken by the classification officer, review AIMS data input and ensure all time frames are being met?

Finding: Ewoldt 111629 out of time frames for a MAX custody approval. (Warden's level). DO 801.04, 1.2.3.1

3. Review the shared drive reports for DI59 and/or DI61 actions, are they within time frames. *** Compare to email notifications sent to Central Classification.

Finding: Several DI61's had not been completed, unit COIV did not notify Central Classification of the type 07 action.

4. Interview CO III. Does the CO III know the steps to take for a max custody placement?

Finding: COIII Valencia-No 48 hour notice given, no DI99 initiated. DO 801.10, 1.1.1.2 through 1.1.1.4

5. Is the inmate being recommended for maximum custody placement being served with the Notice of Hearing and Inmate Rights, (Proposed Maximum Custody Placement) Form 801-6 and a Request for Witness, Form 801-2 at least 48 hours prior to the commencement of the hearing?

Finding: Inaccurate dates on the max packet (Parker 166071-apparently served with 48 hour notice two days after actual hearing). DO 801.10, 1.1.1 through 1.1.1.4

COUNT MOVEMENT

1. Does the shift supervisor or commander review and sign all formal count sheets?

DAKOTA UNIT

Finding: All three of the officers working in the accountability office demonstrated their system of sending count sheets back to the shift commanders for appropriate signatures and reported approximately 70% of the completed count sheets are being sent back for signatures by shift commanders/supervisors. DO 701.04

2. Observe inmate movement on the units. Are inmates being supervised while being moved?

Finding: Inmates were observed returning from recreation passing through a metal detector and returning to the living area without supervision of a staff member in the immediate area. DO 701.05, 1.2.1

FOOD SERVICE

1. Are inmates on approved Restricted Diets being fed separately from the general population?

Finding: Ms. Herbert indicated inmates on restricted diets are served with the general population. TM 912.07, 1.1

INGRESS/EGRESS

1. Review Sign-In / Sign-Out logs for entries to ensure information is complete, legible, and consistent with staff entering / exiting the unit.

Finding: The sign in /sign out log on 02-14-11 did not reflect five of the inspectors who were on the unit. DO 524.04, 1.1.2.1.1

2. Is the assigned officer aware of items which constitute prohibited personal property, such as cellular phones, and hand cuff keys?

Finding: Staff working in the lobby were unaware that staff on "travel status" were able to bring in more than \$20. DO 513.01, 1.6.7.2

3. Evaluate procedure for inspecting food items staff members are attempting to introduce to the unit. Does the unit procedure provide clear guidelines for assigned staff?

Finding: Visitation Post Order does not provide any guidelines for the inspection of food items or their need to be carried through the metal detector. DO 513.02, 1.5

DAKOTA UNIT

KEYS / RADIOS

1. Does the unit have an accurate Master Key Inventory * Review Master Key Inventories and associated documentation for past 12 months..

Finding: Master key inventory does not have the six restricted key sets listed on it for the detention unit. Key control officer COII Pelayo stated they are not documented on the master inventory, but are maintained separately from the rest of the unit keys. He did have an inventory of them on his computer, but they are not included with the monthly inventory. DO 702.02, 1.1

2. Does the inventory list the number of keys available for each lock/locking device?

Finding: The Master key inventory does not list the location of locks and locking devices. Key control officer COII Pelayo stated he does have this information on a different report called a cross reference key report but this report is not included in the monthly key inventory report. DO 702.02, 1.1.3

3. Is a Locksmith Work Order, Form 702-6 used when repair or replacement of key/key rings are required?

Finding: Form 702-6 is not used. Key control officer COII Pelayo uses form 403-2. DO 702.02, 1.2.2.1

4. Each time a key set is issued, or returned does the officer responsible make the appropriate entry in the Key and Credit Card Control sheet (Form 702-1) specifying at a minimum: Key number, date of issue/return, name of authorized staff member, initial

Finding: Inspection revealed not all entries are being properly made. Key set #143 was not signed back in but was hanging on its hook in the locker. Set #34 was not present in the storage locker, yet the log showed the name Prieto as being in possession of it but there was no date, time or officers initial signing it out. DO 702.02, 1.4 through 1.4.1.6

5. Are the names of both employees logged in the Correctional Journal?

Finding: During the inspection, the Main control officer did not log the emergency key box was accessed or the name of the two staff members who accessed it. The officer later stated he could not locate his service

DAKOTA UNIT

journal and had to re-write the log. It is not known if he corrected the discrepancy when re-writing the journal. DO 702.04, 1.4.2

6. Does each emergency key ring have a clearly visible color coded tag to identify the portals and/or buildings the key set will access?

Finding: Key set #6 does not have a color painted on the key set. The color code was supposed to be brown. DO 702.04, 1.6.4

7. Are all manufacturer numbers removed from each emergency key so as to not identify the key?

Finding: Manufacture numbers are not ground off or removed from emergency keys sets 1 keys B and C, key set 2 keys B and C. DO 702.04, 1.8

8. Is there a current Institutional Order addressing the procedural requirements for emergency Key Control?

Finding: Institutional Order on site with key control officer was outdated and signed by Ivan Bartos from 6-15-2004. Key control officer Pelayo was not able to demonstrate knowledge of any updated Institutional Order. Captain Koch did not know of any updated Institutional Order for key control. IMPLEMENTATION

9. Are the radios serviceable and being utilized properly i.e. use of call signs, clear transmissions, no unnecessary conversation?

Finding: Radio call signs or codes were not observed as being regularly used. DO 104.06, 1.1.8

PERIMETERS / TOWERS

1. Close custody units - If the system has perimeter lighting, are all applicable lights operating, with no sign of visible damage, or wear?

Finding: During an inspection of the Vindicator alarm system, it was observed there were two quartz lights (DK060 and DK052) were not functional when the zone was activated during the inspection. CO II Rosas stated the lights had been reported as a security device deficiency about a month prior. TM 4.1.5.1.2

DAKOTA UNIT

SECURITY DEVICES

1. Were appropriate entries made in the Correctional Service Journal?

Finding: Entries were not consistently carried over shift to shift nor were there any entries made when a Security Device deficiency was repaired. (DO 703.01, 1.1.2)

2. Has the unit / complex Chief of Security generated a canned statement which demonstrates a consistent approach to documenting security device inspections by all security staff throughout the unit / complex?

Finding: The SDIs are not consistently logged in accordance with the canned statement in the post orders. (DO 703.01, 1.3)

3. Does the Chief of Security maintain a current file of all documentation relating to inspections, maintenance requests, follow-up actions, and preventive maintenance programs within the institution/unit?

Finding: The follow-up actions taken between when a SDI deficiency is reported and when repaired are not included in the log. (DO 703.01, 1.1.3)

4. Does the Chief of Security ensure SDI work order log repairs are made within time frames?

Finding: Logs when SDI deficiency reported and when it is repaired with no explanation for delay. (DO 703.01, 1.4.4)

5. Does the documentation support Deputy Warden's and Chief's of Security submit exception reports noting any deficiencies observed during their tours?

Finding: Captain Koch did not submit tour reports for Nov 2010, Dec 2010 and Jan 2011. (DO 703.02, 1.2.6 - 1.2.6.2)

TOOLS

1. Are tool stored in a secure area, inaccessible to inmates?

Finding: Floor dolly was observed stored in the tool room office. It was not on any master tool inventory nor was it stenciled or painted. DO 710.02, 1.1

2. Are tools stored on a shadow board with shadow that closely resembles the tool?

DAKOTA UNIT

Finding: Wheel barrows in tool room do not have shadows outlining the tools. DO 712.02, 1.4.1

3. Are all shadow boards clean, and clearly marked with silhouettes closely mirroring the tools to allow for easily visual inspection and inventories?

Finding: Wheel barrows do not have shadows outlining the tools. They are in a box with a painted picture of what appears to be a small picture of a wheel barrow in the box. DO 712.02, 1.4.1

WEAPONS

1. Visually inspect all control rooms where weapons are stored. Are all weapons stored in plain sight and are inventories taken and recorded as required (check the last 90 days of inventories)?

Finding: The DART weapons are stored in Dakota Main Control in a locked cabinet with a solid metal door. (DO 716.02, 1.1.2)

2. Are staff members who are checking the seal on the DART locker at the beginning of each work shift and its condition documenting their findings in a Correctional Service Journal?

Finding: The entries for the DART Weapons Locker seal are sporadic, and when entries are logged, the condition of the seal is not included. The officers are not logging the seal number for the DART Equipment Locker in the journal. (DO 703.02, 1.6.2.1)

DETENTION SERVICES

1. Observe a sanitation inspection during a shift. Are all areas in the unit inspected during the shift?

Finding: Inspections were not being conducted during shift indicated by clotheslines and unauthorized items hanging on wall as well as bottles on cell floor. The Day Shift Sergeant and CO II Verdugo were in attendance during the inspection. Reference: DO 804-01, 1.9

DAKOTA UNIT

REQUIRED SERVICES

1. Are applications stamped "Received" including the date on the reverse side?

Finding: Of the 1% reviewed files one application was missing the received stamp. DO 911.01, 1.3.1

2. Do shift commanders tour visitation at a minimum of once per shift during visiting hours?

Finding: There were no entries in the Correctional Service Journals reflecting the shift commanders touring the visitation area. DO 911.07, 1.4

3. During visiting hours, does the on-site duty officer tour visitation once per shift?

Finding: There were no entries in the Correctional Service Journals reflecting the on-site duty officer touring the visitation area. DO 911.07, 1.4

4. Are visitation rules posted in the visitation rooms?

Finding: There was no observed rules signage in the East or West visitation rooms. DO 911.10, 1.2

5. Are property files maintained in terminal digit order?

Finding: Property files are stored in numerical order using the first three ADC numbers. DO 909.10, 1.7

LA PAZ UNIT

COUNT MOVEMENT

1. Does the shift supervisor or commander review and sign all formal count sheets?

Finding: The La Paz Unit count sheets being used for count at 1100 hours included the count for 0400 on 02/15/2011. The graveyard supervisor had not signed the count sheets after the 0400 count had cleared on any of the count sheets being used on the unit for the 1100 count. DO 701.04

FOOD SERVICE

1. Are inmates on approved Restricted Diets being fed separately from the general population?

Finding: Mr. Lara indicated inmates on restricted diets are served with the general population. TM 912.07, 1.1

INGRESS/EGRESS

1. Evaluate procedure for inspecting food items staff members are attempting to introduce to the unit. Does the unit procedure provide clear guidelines for assigned staff?

Finding: The Post Order does not provide any guidelines for the inspection of food items or their need to be carried through the metal detector. DO 513.02, 1.5

KEYS / RADIOS

1. Does the inventory list all lock/locking device locations?

Finding: There are not lock/locking device locations listed on the Master key inventory. DO 702.02, 1.1.2

2. Does the inventory list the number of keys available for each lock/locking device?

Finding: Key control officer D. Acosta does not have any report with the number of keys for each lock or locking device. DO 702.02, 1.1.3

LA PAZ UNIT

3. Did the emergency keys function properly, and access all areas associated with the color coding of the set?

Finding: Emergency keys for one zone accessed doors for another zone. Emergency key set #1 (Yellow zone) accessed a door in the purple zone. DO 702.02, 1.2.2

SECURITY DEVICES

1. Does the Chief of Security ensure SDI work order log repairs are made within time frames?

Finding: Some SDIs took up to seven days to be repaired with no documentation to explain the delay. (DO 703.01, 1.4.4)

TOOLS

1. Are inventory sheets placed in all areas where tools are stored within the authorized location?

Finding: There were no inventory sheets located around the tool sections in the tool room. The master inventory sheets were observed stored in the Class A section for the tool room only. DO 712.02, 1.2.1.4

2. Are unserviceable tools removed, and new tools added to the master inventory using the Tool Disposition (Form 712-6)?

Finding: There were 3 drill bits broken from 10/2010. (IR verified). The tools are still listed on the Master tool inventory. DO 712.02, 1.2.1.6

3. Are unserviceable tools disposed of appropriately, as prescribed in D.O. 304 Equipment and Inventory System?

Finding: Unusable tools are still in place and still listed on Master tool inventory without properly being disposed of. DO 712.02, 1.2.1.6

INMATE MANAGEMENT

1. Are Class C Violations disposed of within five work days of the filing date of the violation?

Finding: The Disciplinary Officer indicated Class C Violations are disposed of within 7 work days. DO 803.05, 1.1.1

LA PAZ UNIT

REQUIRED SERVICES

1. Are applications stamped "Received" including the date on the reverse side?

Finding: Of the 1% of reviewed files, two applications were missing the received stamp. DO 911.01, 1.3.1

2. Does visitation staff establish and maintain a 4 section visitation file for each inmate? Is all required visitor/visit information entered in AIMS?

Finding: Of the 1% of the unit files reviewed, two inmates had AIMS information which did not reflect the approved visitors in the file. 201461 and 104870. 911.01, 1.7.1

3. Does Section One contain: all background information forms; Visitation List; Visitation Waivers, Form 911-2; Request to Change Visitation/Telephone Listing 911-3; All Visitation notifications relating to the approval, denial, or removal of visitation privileges?

Finding: Of the 1% of the unit files reviewed, one had applications in section one of the file. DO 911.01, 1.1.1.2

4. Does Section Two contain: All Completed Applications to Visit an Inmate?

Finding: Of the 1% of the unit files reviewed, one had applications in section one of the file. DO 911.01, 1.1.1.2

5. Are they approved only by the Deputy Warden?

Finding: When interviewed, COII Dixon stated the approving authority for special visits is the unit ADW. DO 911.05

6. Did receiving unit sign for inmate's property?

Finding: Of the 1% of the unit files reviewed, five files had no signature in the received column. DO 909.05, 1.10

OFFICIAL

**ASPC YUMA FINAL ENVIRONMENTAL
REPORT**

**ARIZONA DEPARTMENT OF CORRECTIONS
INSPECTOR GENERAL BUREAU**

MEMORANDUM

TO: Greg Lauchner, Inspector General, ADC

FROM: Kyle Fouts, Bureau Administrator, Inspections

DATE: March 24, 2011

SUBJECT: **Environmental observations – ASPC Yuma**

During the week of February 14th through 18th, 2011, members of the Inspections Unit along with 2 Central Office programs staff conducted a site inspection at the facility in Yuma, Arizona. While the primary goal of the evaluation was to determine the level of compliance with ADC policy and procedure, our staff performed a secondary inspection in an effort to review environmental issues at the complex. The following results were based upon our observations.

CHEYENNE UNIT

COUNT MOVEMENT

1. Are out-count forms not accepted within 15 minutes prior to count?

Observation: The Shift Sergeant accepted an out count for a special visit after the count had started.

2. Are emergency counts recorded on AIMS generated count sheets which are separated from any other counts?

Observation: The Cheyenne Unit records emergency counts on the same count sheets used for the formal counts throughout the day. Count sheets are re-printed if the need arises.

3. If so, is the controlled movement plan (TOSS) in written format for staff review?

Observation: The controlled movement plan (TOSS) information for each unit is not included in the IO as required by the DO.

4. Does the plan (TOSS) include procedures or direction for emergency situations such as an emergency count?

Observation: There was no written procedure to be reviewed to determine if the written instruction included directions for emergency situations.

5. Does the Institutional Order specify the requirements of the master pass system (TOSS)?

Observation: The Institutional Order did not specify the requirements of the master pass system (TOSS) Implementations Section.

6. Observe inmate movement on the units. Are inmates being supervised while being moved?

Observation: A considerable number of inmates were observed in the outside of the recreation fenced area conversing with and handing items to inmates secured in the recreation area. Cheyenne Staff members were in the area and did not address the issue.

INGRESS EGRESS

1. Does the officer question any manufactured food items sealed in original packaging, causing difficulty in screening the contents inside?

Observation: Food items were not inspected by staff working the lobby. Items in manufactures wrapping were not questioned.

2. Inspect unit ingress / egress points and determine if there are locations where staff can by-pass and/or defeat this procedure. Are the locations secure to the degree staff cannot by-pass the security station?

Observation: Officers were not observing incoming staff clear the metal detector they were focused on the searching of personal items and allowing staff to clear themselves. On 02/14/11 six vehicles were observed on the unit not using anti-theft devices (Club).

KEYS / RADIOS

1. Are all emergency keys stored separately in storage locations specific to each unit in order to avoid confusion when accessing the keys in emergency situations?

Observation: Cheyenne duplicate emergency keys are stored in a secured key box in Cheyenne control with emergency keys for Complex also stored in the same key box. The key set for Complex is color coded white. There is an emergency key set also color coded white for the Cheyenne unit inside the key box.

2. Will a visual inspection of designated key storage areas allow for easy identification of missing key rings?

Observation: The door cover prevents ease of viewing to determine if there are any missing key sets.

PERIMETERS / TOWERS

1. Medium custody units - Does the units perimeter lighting system provide proper lighting which allows for visual detection of movement?

Observation: The lighting in the recreation field is inadequate. The current lighting at the Cheyenne Unit does not provide for adequate lighting in the middle of the recreation field for either side of the unit.

SECURITY DEVICES

1. Has the Chief of Security observed subordinate staff conduct Security Device Inspections?

Observation: Capt Thompson stated he only observes the new staff.

2. Does the Chief of Security have an established format for conducting "security challenges" where upon the staff are tested during security device inspections, providing both a performance tool as well as a training aid?

Observation: Captain Thompson has only conducted perimeter type challenges.

3. Do interviews with staff indicate if the EEO Liaison attend briefings/meetings each month on the Unit?

Observation: There is no unit EEO Liaison at this time.

TOOLS

1. Are tools too large to store on the shadow board in a location where an outline resembling the tool is clearly shown?

Observation: There is a lathe in the dental room not shadow boarded where there is an outline resembling the tool.

2. Were all medical tool sharps disposal areas secured?

Observation: All cabinets storing sharps, tools and syringes were observed unsecured with the locks placed into a container. Many different syringes still in sealed containers were noted being on the counter top and not properly secured.

WEAPONS

1. Does the Unit have a list of staff members trained and authorized to use specialty munitions?

Observation: The supervisors rely upon the information on the individual Weapons Cards to ensure staff are only issued weapon/munitions for which they are qualified.

DETENTION SERVICES

1. Review the records to determine if shift commanders tour each watch cell once every four hours to ensure accurate records are being kept and the security staff are staggering the observation times.

Observation: Shift Commanders are not touring each watch cell and are not ensuring Observation Records are filled out correctly.

2. Interview staff on the use of force. Are guidelines being followed?

Observation: When COII Mora, Franco and Juarez were interviewed, no one could speak to the use of force continuum or what steps they would take if it became immediately necessary to use force.

INMATE SERVICES

1. Has the Legal Access Monitor ever visited the Unit to verify work performed by Paralegals, Ensure contract compliance, review activity logs?

Observation: Librarian Swanson stated he has not seen the Legal Access Monitor in 2 years. DO 902.03, 1.3.4

IM MANAGEMENT

1. Are only inmates who work evening hours authorized to be sleeping during normal work hours?

Observation: 4 Inmates were observed under covers and sleeping during normal work hours.

2. Are the porters closets clean, orderly, and demonstrate attention is given to sanitation?

Observation: Porter closet in south Dorm was not orderly. Empty plastic soda bottles and a netting bag with other supplies were found.

3. Are mop buckets empty and mops drying appropriately when not in use?

Observation: Mop in south Dorm porter closet was not drying properly. The mop head was spread out on the floor instead of neatly drying on a rack.

4. Are inmate wearing ID cards as expected, in the upper left quadrant of their shirts?

Observation: Most inmates observed were not wearing ID cards in the upper left quadrant of their shirts. When instructed to display ID correctly by staff, all inmates complied with directive.

5. Do inmates wear all clothing items correctly?

Observation: Many inmates were observed wearing their shirts untucked. When asked to tuck in their shirts by staff, all inmates complied with directive.

OTHER ENVIRONMENTAL

1. Sculpted beards were observed on inmates.

2. Fire alarms and generator alarm systems completely off line.

3. DART vests have rounds on rear of vest making it difficult to access or identify rounds, DART members individual names announced over unit radio frequency with announcement to respond

4. There were several lights on the backsides of the buildings (no mans land area) where lights would randomly shut off causing dark areas while the light was off. After a period of time the light would come back on and provide appropriate lighting. Staff members seemed to be aware of and unconcerned about the problem.

5. Some of the wire ties on the fences in the Cheyenne Unit are not twisted together in a fashion which would prevent them from being removed. A majority of the fence ties are just folded over and if there is enough length, the wire tie can be removed without tools.

6. A fire hydrant on the north side of the north recreation field of the Cheyenne Unit has a sub surface leak. Staff advised it has been leaking for some time and has been reported. The leak appears to be from the main water supply line and could cause a disruption in water service for the unit if the leak were to get worse.

7. The inmate assigned to power wash the showers on the north yard was observed with a Class A water hose on the unit without a staff member supervising the "A" tool. Inmate was also transporting personal food items and literature in the cart without staff approval.

8. One of the stainless steel bands used to secure the fence fabric to the middle rail at gate 1604 was observed in what appeared to be coming apart. The band was addressed with the Lieutenant. The band remained in the current state for the remainder of the inspection.

9. Officers conducting the security device inspections of the Vindicator Alarm system completed the entire check without any contact from the control room where the system would report the audible and/visual alarm. After the security device inspection was completed, the officer could not state how many time the system was activated, nor could the control room officer state how many times the system should have activated based on the number of times the system detected movement in the alarm area.

10. At the rear of the Cheyenne Unit Medical Building, there are shelves in place that would allow an inmate to climb over the fence or onto a building. The shelves are near an interior fence line.

11. During the inspection of the Accountability Office, a piece of cardboard was observed stuck in the lock areas of the door frame, preventing the door from properly securing. It was mentioned the inmate porter was allowed to place the card board there so he could access the room as needed.

12. While inspecting the vehicle sally port at the Cheyenne Unit, an inmate was observed driving a road worthy semi tractor-trailer on the perimeter road and onto the unit. The inmate was observed on the exterior of the Cheyenne Unit and was not supervised by any staff members.

13. While conducting a lighting inspection of the Cheyenne Unit, several of the lights inside of the perimeter and on the backs of the buildings were observed turning off and not coming back on for a period of time. When the issue was addressed with staff members, they seemed to be aware of the problem an unconcerned when it occurred.

14. The Cheyenne Unit north visitation is currently being used as the food serving area. There are excessive food service items being stored in the outside visitation area (I.E. plastic bread racks, plastic milk crates, food warmers) In addition, the food items and garbage seems to be drawing a lot of the local birds and fly population to the visitation area.

15. There was an I/M purchased fan ADC number 115390 observed in the restricted product storage Connex. The ADC # shows the I/M is inactive according to AIMS.

CIBOLA UNIT

COUNT MOVEMENT

1. Does the plan (TOSS) include procedures or direction for emergency situations such as an emergency count?

Observation: The controlled movement plan (TOSS) information for each unit is not included in the IO as required by the DO.

2. Are emergency counts recorded on an AIMS generated count sheets which are separated from any other counts?

Observation: The Cheyenne Unit records emergency counts on the same count sheets used for the formal counts throughout the day. Count sheets are re-printed if the need arises.

INGRESS/EGRESS

1. Are all staff entering the unit required to pass through a metal detector while being observed by the assigned officer?

Observation: The metal detector was activating randomly when no staff were passing through, and lobby staff were aware the metal detector was not working properly. Lobby staff would wait to see the visual indicator to go back to green then tell staff to hurry through before the metal detector activated again.

KEYS / RADIOS

1. Does the staff member demonstrate the ability to obtain and utilize emergency keys? Randomly select a staff member from each unit and each shift and direct them to gain access to the emergency keys for a specific location and monitor their progress.

Observation: Out of the 5 random staff who were interviewed, one staff member, swing shift officer Revelez did not know how to utilize the emergency key system by using the Alpha dot system.

PERIMETER / TOWERS

1.. Medium Custody units- Does the unit have 10' fencing with 1 coil of 30" five point concertina razor ribbon mounted around the top of the outdoor visitation enclosure?

Observation: The fence for the outside visitation area is only eight foot high in lieu of the required 10 foot high fence.

1. Observation: During the inspection of the Cibola Unit exterior perimeter fence line, there were several wire ties observed not twisted together. The wire ties were in place but appear to never have been twisted correctly when the fence was constructed.

2. Observation: During the inspection of the Cibola Unit exterior perimeter fence line, some of the Shaker Wire junction boxes were not fastened securely and could be removed without tools. Removal of the junction boxes would disrupt the Shaker Wire Alarm system.

3. Observation: During the inspection of the Cibola Unit exterior perimeter fence line, several bare copper wire ground cables were observed coming out of the ground and fastened to the metal fence poles. The copper cables pose a trip hazard for staff members conducting walking perimeter checks and exposed in some areas where they could be hooked by machinery performs drag operations on the perimeter.

4. Observation: During the inspection of the Cibola Unit exterior perimeter fence line, exposed copper electrical wires were observed around what appears to be an old well in the north west corner of the Cibola Unit. The wires represent an electrical shock hazard, but it was undetermined if the wires were charged.

5. Observation: The metal detector at the entrance of the Cibola Unit was either not functioning properly or the sensitivity was set so high; it was constantly going off, even when there was no one passing through it.

6. Observation: During the inspection, maintenance inmates were observed being transported within the Cibola Unit by riding on the tailgate of a maintenance pick-up.

7. Observation: Officers testing the Shaker Wire Alarm System do not use a chime test. Staff members have been instructed to hit the fences with a piece of square tubing until the alarm activates. During interviews with officer, it could not be determined if the testing method was instructed by the vendor or if the test method is authorized. Different officers hit the fence harder and more times than others to make the alarm activate creating an inconsistency in the results of the test. In some case the officer had to hit the fence several different times to ensure the alarm activated.

8. Observation: While entering the Cibola Unit, it was observed the physical plant design of the unit would allow visitors the ability to travel directly to the fence line on the north end of the Administration Building allowing a person to be undetected and throw items over the fence to visitation or compromise the fence which does

not have a shaker alarm system. This observation is compounded by the fact the inspectors were able to remain in the area for about forty minutes without being approached by security staff.

SECURITY DEVICES

1. Do interviews with staff indicate if the EEO Liaison attend briefings/meetings each month on the Unit?

Observation: There is no unit EEO Liaison at this time.

WEAPONS

1. Does the Unit have a list of staff members trained and authorized to use specialty munitions?

Observation: The supervisors do not maintain a list of staff trained to use specialty weapons.

INMATE SERVICES

1. Has the Legal Access Monitor ever visited the Unit to verify work performed by Paralegals, Ensure contract compliance, review activity logs?

Observation: Librarian Swanson stated he has not seen the Legal Access Monitor in 2 years. DO 902.03, 1.3.4

IM MANAGEMENT

1. Are inmate wearing ID cards as expected, in the upper left quadrant of their shirts?

Observation: Most inmates observed were not wearing ID cards in the upper left quadrant of their shirts. When instructed to display ID correctly by the Lt., all inmates complied with directive.

2. Do inmates wear all clothing items correctly?

Observation: Many inmates were observed wearing their shirts untucked. When asked to tuck in their shirts by staff, all inmates complied with directive.

REQUIRED SERVICES

1. Cibola Mail and Property staff could not locate Seized Contraband when asked to produce an item that was not yet destroyed per the Contraband log.

2. I/M workers were allowed in the back of the Mail and Property room with no direct supervision. Seized contraband is stored at this location.

OTHER ENVIRONMENTALS:

1. During an I/M's living area search in Cibola, Officer Rios did not confiscate an inappropriate photo or unauthorized accordion file folders an I/M had in their living area. The unit Lt. was advised and the officer removed the files.

2. Search logs in Cibola Unit do not always indicated I/M name and number for random I/M searched.

COCOPAH UNIT

COUNT MOVEMENT

1. Does the plan (TOSS) include procedures or direction for emergency situations such as an emergency count?

Observation: The controlled movement plan (TOSS) information for each unit is not included in the IO as required by the DO.

FOOD SERVICE

1. Is there a sanitation log on the dish machine?

Observation: There was a temperature log near the dish machine, however no sanitation log was found at time of inspection.

KEYS / RADIOS

1. Interview the Chief of Security. Does the unit conduct emergency key drills on a frequent basis?

Observation: Captain Roerink stated they do "Occasional emergency key drills but not on a frequent basis.

PERIMETERS / TOWERS

1. Minimum custody units-Is the vehicle gate 14' wide and electrically operated from the Main Officer station and monitored by a TV camera with a remote recording monitored from the administration building officer station?

Observation: The Cocopah unit does not have a vehicle gate which electrically operated from the Main Officer Station. The gates allowing access to the unit enter

through the Fleet Services area and is not monitored by a TV camera with a Remote Recording monitored from the Administration Building Officer Station.

1. **Observation:** During the inspection of the perimeter of the Cocopah unit on 02/17/2011, the outdoor security lights were still on at 0930.

2. **Observation:** While inspecting the perimeter fence, observations reveal some of the external fence ties are aluminum and some were a thin wire which could be easily removed. On some of the interior fences, some of the fence strap bolts are not tac welded to ensure the straps remain in place.

SECURITY DEVICES

1. Does the Chief of Security have an established format for conducting "security challenges" where upon the staff are tested during security device inspections, providing both a performance tool as well as a training aid?

Observation: Captain Roerink stated he has not established any challenges in regards to security devices.

2. Do interviews with staff indicate if the EEO Liaison attend briefings/meetings each month on the Unit?

Observation: There is no unit EEO Liaison at this time.

TOOLS

1. Are tools too large to store on the shadow board in a location where an outline resembling the tool is clearly shown?

Observation: Air compressor was stored on the floor of the class A cabinet without any outline resembling the tool.

WEAPONS

1. Does the Unit have a list of staff members trained and authorized to use specialty munitions?

Observation: No list is maintained of staff trained and authorized to use specialty munitions.

INMATE SERVICES

1. Has the Legal Access Monitor ever visited the Unit to verify work performed by Paralegals, Ensure contract compliance, review activity logs?

Observation: Librarian Swanson stated he has not seen the Legal Access Monitor in 2 years.

IM MANAGEMENT

1. Are only inmates who work evening hours authorized to be sleeping during normal work hours?

Observation: 7 inmates were observed under covers and sleeping during normal work hours. When asked why so many inmates were sleep during normal work hours, Officer Codova could not speak to this.

2. Are inmates wearing ID cards as expected, in the upper left quadrant of their shirts?

Observation: Some inmates observed were not wearing ID cards in the upper left quadrant of their shirts. When instructed to display ID correctly by Sgt. Garlock, all inmates complied with directive.

3. Do inmates wear all clothing items correctly?

Observation: Many inmates were observed wearing their shirts untucked. When asked to tuck in their shirts by staff, all inmates complied with directive.

OTHER ENVIRONMENTALS:

1. Cocopah unit: When asked how preventative maintenance is handled at Cocopah, Canteen Manager Caudillo indicated that duct tape is utilized to make repairs. Sgt. Garlock refuted this statement

2. Inmate work crew searches were conducted in the area where detention was once held at Cocopah. Some of the cells where the inmates stripped contained stacks of mattress pads toward the back. The mattresses could present a way for inmates to conceal contraband.

COMPLEX

COUNT MOVEMENT

1. Does the plan (TOSS) include procedures or direction for emergency situations such as an emergency count?

Observation: The controlled movement plan (TOSS) information for each unit is not included in the IO as required by the DO.

KEYS / RADIOS

1. Interview the Chief of Security. Does the unit conduct emergency key drills on a frequent basis?

Observation: Captain Miller stated there has been no emergency key drill conducted in approximately 6 months.

2. If inmates are observed operating road worthy vehicles of any type, are they under constant supervision by a staff member?

Observation: Inmates observed during the week of the inspection were driving road worthy vehicles while not under direct staff supervision. The vehicles driven were sedans, trucks, semi tractor trailer and vans.

3. Are all emergency keys stored separately in storage locations specific to each unit in order to avoid confusion when accessing the keys in emergency situations?

1. **Observation:** Complex emergency keys are stored in a secured key box in Cheyenne control with duplicate emergency keys for Cheyenne also stored in the same key box. The key set for Complex is color coded white. There is an emergency key set also color coded white for the Cheyenne unit inside of the key box.

2. **Observation:** While inspecting the motor pool area several keys were located in desk drawers and in anti-theft devices (Club) in the fleets services area. The keys were not on the master key inventory in the Fleet Services area.

3. **Observation:** During the inspection, an inmate was observed driving a Perimeter Security Vehicle from the gas pump to the wash rack. The inmate exited the vehicle and walked to the shop at Fleet Services while the vehicle was still running. The inspector removed the keys and delivered them to the shop supervisor.

PERIMETER / TOWERS

1. Inspect perimeter vehicles for serviceability and safety. Identify if vehicles contain appropriate equipment such as functional radios, rifle / shotgun racks, working spotlights, flashlights, and first-aid kits. Are the perimeter vehicle in good condition?

Observation: On February 17, 2011, a Cibola Unit perimeter officer on dayshift was utilizing a perimeter truck without a rifle rack to secure the shotgun. The shotgun was service loaded and lying across the vehicle floor with the gun barrel in the direction of the officer's legs.

2. Monitor perimeter operations in a low light / no light environment. Are perimeter patrols equipped for nighttime operations? If perimeter lighting systems are in place, are they functional, and adequate for the needs associated with the location?

Observation: The Complex Perimeter Officers utilize a hand held spotlight for night time perimeter operations. During the night time inspection of perimeter operations, there were no lights observed being used by the perimeter officers. Handheld spotlights may not be the best option for providing auxiliary light for the perimeter officers to perform perimeter duties. The perimeter vehicles in use did not have any auxiliary lighting attached to the vehicles to provided lighting to assist the perimeter officer in performing track detection on the perimeters.

3. Conduct an unannounced security challenge on each unit perimeter to monitor response, and identify any areas of concern. Provide results to Complex Major / Chief of Security upon conclusion of exercise.

Observation: As a security challenge, track was set on different unit perimeters. Response times varied from approximately 30 minutes to as long as two hours before the tracks were discovered by a complex perimeter officer.

4. Identify protocol for "shift change" and determine if all perimeter officers conduct shift change at one set location.

Observation: If there are no relief vehicles, the current perimeter officer reports to Complex Control to be relieved by the on-coming officer.

5. Question officers to determine approximate time utilized to conduct a shift change. Does the exchange take 5 minutes or less?

Observation: Relief of perimeter officers takes approximately fifteen to twenty minutes where the perimeters operations are not being conducted. In some cases, the relief may take as long as thirty minutes.

SECURITY DEVICES

1. Does the Chief of Security have an established format for conducting "security challenges" where upon the staff are tested during security device inspections, providing both a performance tool as well as a training aid?

Observation: Captain Miller says he sets challenges for escapes and intrusion scenarios but not for security devices.

2. Do interviews with staff indicate if the EEO Liaison attend briefings/meetings each month on the Unit?

Observation: There is no Complex EEO Liaison at this time.

WEAPONS

1. Does the senior firearms instructions have a system in place to track qualifications?

Observation: Lt. Baird, Senior Firearms Instructor does not have a system in place to track weapons qualifications.

IM SERVICES

1. Are there staff trained in how to conduct random monitoring of personal calls?

Observation: IO is present however, does not instruct for SSU monitoring Phone calls.

REQUIRED SERVICES

1. Are inmates prohibited from access to staff property, clothing and uniforms?

Complex Observation: In the warehouse there is a cabinet storing maintenance staff uniforms and clothing which is not secured. Inmates were in the area unsupervised.

OTHER ENVIRONMENTALS:

1. Due to recent changes with Complex Staffing, the Roll Gate to Fleet Services remains open during business hours. During the inspection of this area, the locked box containing the controls was open and the lock was unsecured.

2. During the inspection, there were tracks set on all of the unit perimeters. The Complex shift supervisors were observed clearing the tracks without contacting the units or having the units assist to ensure the tracks were security challenges as appose to tracks being left by a possible escapee.

3. During an inspection of the Motor pool area, an after market set of tires and rims were beings stored in a Connex box in the fleet service area. The required after market lug nuts were located in a desk drawer in the office area. The Motor Pool Supervisor stated the tires and rims were for a Dodge service truck he was rebuilding for him to use as a service truck. When the four wheel drive truck was reassigned to Complex Chase Team, he just refrained from placing the tires and wheels on the truck. It should be noted the tires and wheels appeared to be of higher quality and price that others in the area.

4. After entering the Cibola Unit and as a security challenge, the inspector was able to stand in front of the Cibola Unit for approximately 40 minutes without being challenged. The perimeter officer passed by twice and failed to observe the inspector standing in front of the building without authorization.

5. While inspecting the motor pool area, several cell phone chargers and ear phones were observed in an office area of fleet service area.

6. While inspecting the motor pool area, the vehicle used as the fleet service vehicle was found unsecured with the passenger side window down. When returning the next morning, the truck was in the same spot, unsecured with the window down. In addition, the tool box in the vehicle was unsecured and had several vehicle recovery items inside.

7. Complex: While inspecting the motor pool area several small tools (Allen wrenches, heli-coil tool, drill bits, screw driver bits, etc.) were located in desk drawers and were not on a tool inventory.

8. Complex: While inspecting the motor pool area, the motor pool supervisor stated he had three MSDS manuals covering all items he has ever had in the Motor pool area. When asked for a specific MSDS on a specific product, the sheet could not be found without extensive searching, which would defeat the purpose of the MSDS in an emergency.

9. Complex: While inspecting the motor pool area wire handles were observed on five gallon buckets containing sand blasting beads. A heavy gauge fabricated wire handle was also noted being on a five gallon bucket located at the lift station inside of the bed of a truck belonging to one of the contractors for the waste water.

DAKOTA UNIT

COUNT MOVEMENT

1. Is the shift supervisor actively involved in the count process to ensure its accuracy?

Observation: The three staff members working in accountability reported they rarely see their supervisor in the office while the count is being cleared.

2. Are inmates being searched consistently and effectively at control points?

Observation: Recreation inmates were observed returning from recreation and passing through a metal detector in from of the living area. There was not an officer present at the metal detector while inmates were passing through.

3. Does the plan (TOSS) include procedures or direction for emergency situations such as an emergency count?

Observation: The controlled movement plan (TOSS) information for each unit is not included in the IO as required by the DO.

FOOD SERVICE

1. Is there a sanitation log on the dish machine?

Observation: The unit had a sanitation log; however it was not located on the dish machine.

KEYS / RADIOS

1. Interview the Chief of Security. Does the unit conduct emergency key drills on a frequent basis?

Observation: Captain Koch stated there have been no emergency key drills conducted in the past 6 months and the emergency keys are accessed for emergency situations as well as daily to access dorm 7 due to it not being populated by inmates and staff required to check on the dorm.

PERIMETER / TOWERS

1. **Observation:** During a lighting inspection the lights on the back of buildings 5, 6 & 7 were not working making the area behind these housing locations very dark and unable to see.

2. **Observation:** Officers conducting the security device inspections of the Vindicator Alarm system completed the entire check without any contact from the control room where the system would report the audible and/visual alarm. After the security device inspection is completed, the officer could not state how many times the system was activated, nor could the control room officer state how many times the system should have activated based on the number of times the system detected movement in the alarm area.

3. **Observation:** Some of the wire ties on the fences in the Dakota Unit are not twisted together in a fashion which would prevent them from being removed. A majority of the fence ties are just folded over and if there is enough length, the wire tie can be removed without tools.

SECURITY DEVICES

1. Has the Chief of Security observed subordinate staff conduct Security Device Inspections?

Observation: Captain Koch states he works with the new staff but not the staff who have been in the unit for awhile.

2. Does the Chief of Security have an established format for conducting "security challenges" where upon the staff are tested during security device inspections, providing both a performance tool as well as a training aid?

Observation: Captain Koch stated he has set challenges for fences tracks and escapes but not for Security Devices.

3. Do interviews with staff indicate if the EEO Liaison attend briefings/meetings each month on the Unit?

Observation: There is no unit EEO Liaison at this time.

TOOLS

1. Are ladders and scaffolds over 6 feet in length identified and stored as Class A tools?

Observation: 40 foot ladder was observed chained to a fence inside the "spline" area with no shadow. The ladder is logged onto the tool inventory for the tower. When interviewed, Captain Koch did not know why it was there and stated it was there prior to him being the COS.

WEAPONS

1. Inspect the monitoring equipment (cameras, recording devices, etc). Are they maintained in good repair?

Observation: Cameras #3 & #9 have been nonfunctional since September 2010.

2. Does the Unit have a list of staff members trained and authorized to use specialty munitions?

Observation: The supervisors rely upon the information on the individual Weapons Cards to ensure staff are only issued weapon/munitions for which they are qualified.

DETENTION SERVICES

1. Are documents being filed in the Inmate detention file within an appropriate timeframe?

Observation: During the inspection it was noticed filing was not being done. There were documents from November 2010 not filed.

INMATE SERVICES

1. Has the Legal Access Monitor ever visited the Unit to verify work performed by Paralegals, Ensure contract compliance, review activity logs?

Observation: Librarian Swanson stated he has not seen the Legal Access Monitor in 2 years.

IM MANAGEMENT

1. Are inmate wearing ID cards as expected, in the upper left quadrant of their shirts?

Observation: Some inmates observed were not wearing ID cards in the upper left quadrant of their shirts. When instructed to display ID correctly by staff, all inmates complied with directive.

OTHER ENVIRONMENTALS:

1. When Grievance Files were reviewed, it was discovered in some instances Inmate Grievance Form 40000046 was used instead of Inmate Grievance Form 802-1. DO 802.03, 1.1 indicates 802-1 form should be utilized.

2. Grievance Files were incomplete. Inmate file #194250 contained the inmate letter response but did not have a copy of the inmate's initial letter. In addition, several files were labeled 'unprocessed'. The documentation in the grievance log was delayed for many of the unprocessed files. For example, Inmate file #138355 indicated date of grievance as 2/11/10, but was not documented in the grievance log until December 2010. CO IV Higgin has been in the position for a few months and is currently correcting the files that are in disarray.

LA PAZ UNIT

COUNT MOVEMENT

1. Does the plan (TOSS) include procedures or direction for emergency situations such as an emergency count?

Observation: The controlled movement plan (TOSS) information for each unit is not included in the IO as required by the DO.

INGRESS EGRESS

1. Inspect unit ingress / egress points and determine if there are locations where staff can by-pass and/or defeat this procedure. Are the locations secure to the degree staff cannot by-pass the security station?

Observation: The metal detector at the lobby was not set at a sensitivity level comparable to other Units. At all other units, Inspectors had to take shoes off to clear the metal detectors. At the La Paz Unit, Inspectors easily cleared the metal detector with shoes on and a vehicle key in pocket.

KEYS / RADIOS

1. Is there a site diagram which clearly shows where each emergency key set will provide access within a specific unit?

Observation: Key control officer Acosta does not have a site diagram showing the location of zones.

2. Does the site diagram / map clearly show the color code for each building to allow for ease of identification during a crisis?

Observation: Key control officer Acosta does not have a site diagram showing the location of zones.

3. Are beginning/ending key inventories being completed on each shift, and documented appropriately in the Correctional Service Journal?

Observation: Day shift officer COII Gutierrez documented in the service journal "Conducted all inventories". Did not document the status of the inventory as being all accounted for or what inventory was conducted (i.e. keys, radios, equipment).

PERIMETERS / TOWERS

1. Minimum custody units-Is the Outdoor visitation space enclosed with an 10 foot high (Minimum) fence with a coil of 30" five point concertina razor ribbon mounted at the top of the fence?

Observation: The fence for the outside visitation area is only eight foot high in lieu of the required 10 foot high fence.

1. **Observation: The yards lights on the La Paz unit were observed remaining on well after daylight. It could not be determined if the lights were on a timer or photo-electric cell.**

2. **Observation: Officer testing the Shaker Wire Alarm System do not use a chime test. Staff members have been instructed to hit he fences with a piece of square tubing until the alarm activates. During interviews with officer, it could not be determined if the testing method was instructed by the vendor or if the test method is authorized. Different officers hit the fence harder and more times than others to make the alarm activate creating an inconsistency in the results of the test. In some case the officer had to hit the fence several different times to ensure the alarm activated.**

3. **Observation: While entering the La Paz Unit, it was observed the physical plant design of the unit would allow visitors the ability to travel directly to the fence line on the north end of the Administration Building. If this were to occur when the officers in the control room/ingress egress area were very busy checking in visitors, a person could approach the area undetected and throw contraband into visitation or comprise the security of the fence which does not have a Shaker**

Alarm system. This observation is compounded by the fact the inspectors were able to remain in the area for about forty minutes without being approached by security staff or being observed in the area by the perimeter officer that passed by at least two times.

4. Observation: During the inspection of the La Paz Unit exterior perimeter fence line, some of the Shaker Wire junction boxes were not fastened securely and could be removed without tools. Removal of the junction boxes would disrupt the Shaker Wire Alarm system.

5. Observation: During the inspection of the La Paz Unit exterior perimeter fence line, several bare copper wire ground cables were observed coming out of the ground and fastened to the metal fence poles. The copper cables pose a trip hazard for staff members conducting walking perimeter checks and exposed in some areas where they could be hooked by machinery performs drag operations on the perimeter.

SECURITY DEVICES

1. Has the Chief of Security observed subordinate staff conduct Security Device Inspections?

Observation: Captain Antonio stated he has not observed his staff as they conduct an SDI.

2. Does the Chief of Security have an established format for conducting "security challenges" where upon the staff are tested during security device inspections, providing both a performance tool as well as a training aid?

Observation: Captain Antonio stated he has not set any challenges for security devices.

3. Do interviews with staff indicate if the EEO Liaison attends briefings/meetings each month on the Unit?

Observation: There is no unit EEO Liaison at this time.

TOOLS

1. Dental hand pieces were observed being engraved. Policy states that these tools cannot be engraved.

Observation: Tool room officer Acosta has managed to engrave all dental hand tools. This could cause infection to inmates when the tool is placed in inmates mouths due to bacteria which may have gotten inside the engraved metal.

WEAPONS

1. Does the Unit have a list of staff members trained and authorized to use specialty munitions?

Observation: The supervisors keep a list of weapons expiration dates only.

INMATE SERVICES

1. Has the Legal Access Monitor ever visited the Unit to verify work performed by Paralegals, Ensure contract compliance, review activity logs?

Observation: Librarian Swanson stated he has not seen the Legal Access Monitor in 2 years.

IM MANAGEMENT

1. Are inmate wearing ID cards as expected, in the upper left quadrant of their shirts?

Observation: Some inmates observed were not wearing ID cards in the upper left quadrant of their shirts. When instructed to display ID correctly by Captain, all inmates complied with directive.

2. Do inmates wear all clothing items correctly?

Observation: Many inmates were observed wearing their shirts untucked. When asked to tuck in their shirts by staff, all inmates complied with directive.

Observations regarding inmate work activity, programs, and educational opportunities will be discussed in detail within the report submitted by Chuck Manning.

If there are any questions regarding these observations, please contact me for further discussion.

ASPC YUMA CORRECTIVE ACTION PLAN

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|---|---|-----------------|
| Complex | Classification - Observe the OIU filing process. Is there an acceptable backlog present? | Filing backlog: Some of the paperwork waiting to be filed was dated 9/24/10, 10/4/10, and 10/24/10 | <i>Filing is completed and up to date.</i> | 4/12/2011 |
| Complex | Classification - Do inmate escape fliers have a front and side digital photograph of the inmate? | Inmate Blackshire 229715 did not have a profile photo included in his escape flier, only a front shot was in the file. DO 901.08, 1.1.2.1 | <i>Corrected; process in place to verify during OIU audit reviews.</i> | 4/12/2011 |
| Complex | Classification - Does the receiving institution OIU Manager compare the previous photo in the institution file/release packet with the digital photo taken upon receipt of the release violator/escapee to verify the identity of the inmate? | Per OIU Manager, Denise Soria, Transportation Sgt. compares the photos. DO 901.08, 1.3.2.2 | <i>If a release violator/escapee is returned to the institution with a photo, OIU manager will pull any mug photo available (if released from ASPC-Yuma) and verify the identity of the inmate.</i> | 4/12/2011 |
| Complex | Classification - Review random inmate files in OIU and ensure the file contains the required information. | Inmate Smith 254175 had no body receipt on side 2 of the institutional file. Also, the Scars/Deformities, Marks/Tattoos form 901-3 was not found in any of the observed files. DO 901.08, 1.1 through 1.3.2.3 | <i>Completed; a memorandum from Brenda Smith dated in 2008 specifies form 901-3 is completed at Alhambra. SSU updates as needed. Ms. Stacy Crabtree advised appropriate changes will be made to policy.</i> | 4/12/2011 |
| Complex | Count Movement - Does the Warden or designee notify the ROD/DD and Offender Services Bureau in writing when deactivating, reactivating or "red lining" a specific bed? | The Warden stated he does not notify the ROD/DD and Offender Services Bureau in writing when deactivating or "red lining" a specific bed. DO 701.01, 1.5.1 | <i>Notification will be sent to ROD/DD and Offender Services Bureau.</i> | 4/12/2011 |
| Complex | Keys/Radios - Is a Locksmith Work Order, Form 702-6 used when repair or replacement of key/key rings are required? | Complex key control officer stated he uses the 403-2 form instead of the 702-6 form. DO 702.02, 1.2.2.1 | <i>Corrected; using Form 702-6. If a request is submitted using the incorrect form, it is returned and advised to re-submit on Form 702.6.</i> | 4/12/2011 |
| Complex | Keys/Radios - If inmates are possession of keys does the key control officer have copies of the written approval for inmate to have possession of keys? | When interviewed, Capt. Miller stated he has not seen nor knows of any written approval or memo from the Warden or Deputy Warden for inmates to use or be in possession of keys. The inmates observed were driving road worthy vehicles including cars, sedans, vans, semi trucks. DO | <i>Corrected; Complex, Cocopah, and Occupational Safety Consultant has an updated list.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|---|--|-----------------|
| Complex | Keys/Radios - Are all manufacturer numbers maintained in the master key inventory? | Manufacturer numbers are not maintained in the Master key inventory. DO 702.04, 1.8 | <i>Corrected; maintained on master key inventory.</i> | 4/12/2011 |
| Complex | Security Devices - Has the unit / complex Chief of Security generated a canned statement which demonstrates a consistent approach to documenting security device inspections by all security staff throughout the unit / complex? | The statement required by the Institutional Order is not being consistently used by the staff to log SDIs. DO 703.01, 1.3 | <i>Staff re-training completed. Supervisors to ensure training is on-going.</i> | 4/12/2011 |
| Complex | Security Devices - Does the Chief of Security maintain a current file of all documentation relating to inspections, maintenance requests, follow-up actions, and preventive maintenance programs within the institution/unit? | The COS does not document the follow-up actions for SDI deficiencies. DO 703.01, 1.1.3 | <i>COS completes and documents.</i> | 4/12/2011 |
| Complex | Security Devices - Does the Chief of Security ensure SDI work order log repairs are made within time frames? | One entry in SDI log dated 10/10 stated "Awaiting Equip/Parts" with no further explanation for delay in the repair. DO 703.01, 1.4.4 | <i>COS completes and documents.</i> | 4/12/2011 |
| Complex | Security Devices - Does the documentation support Deputy Warden's and Chief's of Security submit exception reports noting any deficiencies observed during their tours | Capt. Miller did not submit tour reports for Nov 2010, Dec 2010 and Jan 2011. DO 703.02, 1.2.6 - 1.2.6.2 | <i>COS completes tour reports.</i> | 4/12/2011 |
| Complex | Security Devices - Do the duty officer and EEO Liaison submit reports to the Wardens Office? | The EEO Liaison has been on extended leave for three months. Reports have not been submitted to the Wardens office during the time of absence. DO 703.02, 1.5.2 | <i>Duty officers and Equal Opportunity Liaisons submits reports for the Warden's review.</i> | 4/12/2011 |
| Complex | Security Devices - Does a review of random EEO Liaison reports indicate the assigned EEO liaison is making required tours? | There has not been an EEO Liaison on duty for at least three months and no one has been appointed to assume this responsibility. DO 703.02, 1.5.2 | <i>EEO Liaison has been appointed and on duty.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|---|--|-----------------|
| Complex | Tools - Are tool stored in a secure area, inaccessible to inmates? | Inmates were observed in different tool room areas throughout Complex without direct supervision. Some of these areas included welding shop, Fire safety cage and work crew trailers. DO 712.01, 1.1 | <i>Staff have been re-directed and trained in accordance with policy. Supervisors are conducting spot checks to ensure policy compliance.</i> | 4/12/2011 |
| Complex | Tools - Are tools stored on a shadow board with shadow closely resembles the tool? | In various areas throughout Complex, it was observed there are tool storage areas where the tool shadow board does not closely match the shape of the tool stored on the shadow board for that area. DO 712.02, 1.4.1 | <i>Complex tool room, assigned maintenance tool trucks, wastewater, motor pool and welding shop are complete.</i> | 4/12/2011 |
| Complex | Tools - Are tools being signed out/in appropriately on the correct form? (Tool Check out Form 712-4) | K-9 staff do not sign out tools assigned to the kennel area. Inmates assigned to work crew #1 were signing out tools to themselves from the work crew #1 tool trailer. DO 712.02, 1.5.1.1.1 | <i>Staff have been re-directed and forms are being completed daily.</i> | 4/12/2011 |
| Complex | Tools - Are the completed Tool Check Out Forms (712-4) kept on file in the tool room for the previous thirty days? | Motor pool staff only had 18 days of tool check out forms on hand for the month of February. DO 712.02, 1.2.1.2 | <i>Corrected; previous thirty days are on hand.</i> | 4/12/2011 |
| Complex | Tools - Did the person responsible for tool control ensure all tools were accounted for at the beginning and ending of the shift?? | K-9, Maintenance, waste water, welding shop and motor pool and work crew supervisors do not keep a service journal to document tools being accounted for at the beginning or end of the shift. DO 712.02, 1.2.3.3 | <i>Work crew supervisors complete journals. K-9, maintenance, waste water, welding shop and motor pool call into Complex Main Control and/or tool room (depending upon time of return)</i> | 4/12/2011 |
| Complex | Tools - If there was a tool unaccounted for, was appropriate action taken? | Tool trailer for work crew #1 has a missing garden hoe not accounted for. There is no tool inventory showing the correction or a chit to show it is out for service. Officers assigned to the crew were not able to speak of the missing garden hoe. DO 712.02, 1.8 | <i>Accounted for with proper tool disposition.</i> | 4/12/2011 |
| Complex | Tools - Observe posted inventory sheets. Compare inventory with stored tool. Is the inventory accurate? | Class A drill bits 8477 and 8046 do not match number on Master tool inventory. DO 712.02, 1.2.3.1 | <i>Corrected and re-training with COII Gomez; Complex Tool Room Officer.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|---|---|-----------------|
| Complex | Did the officer ensure all appropriate documents were completed? | Tool room officer did not update the Master tool inventory to reflect the proper number of drill bits in the class A tool area. DO 712.02, 1.2.1.6 | <i>Corrected.</i> | 4/12/2011 |
| Complex | Tools - Are all tools permanently engraved/stamped and color-coded using the applicable units assigned color? | Not all tools were observed to be color coded in the main tool room throughout all sections 1000-8000. Not all observed tools have the same black paint to color code the tool. In the main tool room, there were orange colored tools. In the Maintenance vehicles, there were tools color coded black, red, and yellow. In addition, not all tools were engraved. In the welding room, there were some tools not engraved and with different color codes. The key control tools were color coded yellow. The color designation for Complex tools is black. DO 712.02, 1.2.1.5 | <i>Completed; engraving and color coded.</i> | 4/12/2011 |
| Complex | Tools - Is the tool control officer is the only staff who permanently engraves/stamps and color-codes tools. | Using a tool engraver which is assigned to the motor pool, the motor pool staff stated that when they break a tool, they take it off site to exchange it for a new replacement tool at a local retailer. The motor pool staff further stated that when they return to the Complex with the new tool, they engrave the tools themselves. New tools from motor pool are not received through the Complex tool room for proper engraving. DO 712.02, 1.2.1.5 | <i>Tool engraver removed. All tools go through the Complex Tool Room.</i> | 4/12/2011 |
| Complex | Tools - Are all tool inventories logged into the appropriate Correctional Service Journal by those staff who conducted the inventories? | Maintenance, K-9, waste water, weld shop, work crews #1 and #2 and motor pool staff do not document inventories in the service journals. Those areas do not report to the Complex tool room officer to advise all tool inventories are accounted for. DO 712.02, 1.2.3.3 | <i>Work crew supervisors complete journals. K-9, maintenance, waste water, welding shop and motor pool call into Complex Main Control and/or Tool Room (depending upon time of return).</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|---|--|-----------------|
| Complex | Tools - Are all shadow boards clean and clearly marked with silhouettes closely mirroring the tools to allow for easily visual inspection and inventories? | In various areas throughout Complex, including main tool room, water treatment plant, motor pool, maintenance and tool trailers for crews #1 and 2, it was observed there are many areas where the tool shadow does not closely match the shape of the tool. Complex tool room Grinder and wheel barrels are not properly shadowed. Waste water treatment plant wheel barrel, pant bibs, and paint brushes are not shadowed. Motor pool gloves are improperly shadowed. Tool trailer #1 shovels are not properly shadowed. Work crew #2 trailer has 2 trench shovels present which are not shadowed. DO 712.02, 1.4.1 | <i>All areas completed and Tool Trailer #2 removed from service</i> | 4/12/2011 |
| Complex | Tools - If a tool is removed for repair, is a chit with the tool number placed on the shadow board? | Tool trailer for work crew #1 was observed not using chits when tools are removed for repair. DO 712.02, 1.4.3 | <i>Corrected, staff re-trained.</i> | 4/12/2011 |
| Complex | Tools - If a tool is removed permanently, is the shadow board updated immediately? | Work crew #2 trailer displays a shadow for a spade shovel which is neither present or on the inventory sheet. DO 712.02, 1.4.2 | <i>Tool trailer #2 has been removed from service.</i> | 4/12/2011 |
| Complex | Tools - Are portable explosive or air driven tools prohibited for inmates to check-out and instead only issued to staff? | Motor pool staff checked out air driven tools on the tool check out forms directly to inmates who are assigned to work in the motor pool, not to the inmate supervisor. DO 712.02, 1.5.3 | <i>Staff re-directed to ensure tools are checked out appropriately to inmates.</i> | 4/12/2011 |
| Complex | Does a file exist in the institutions warehouse that has each products name, date received, quantity received and list of trained staff to use each product? | No MSDS sheet for blue toilet cleaner were found at the Cibola unit. When asked about this, OSC III Duffy stated he was not aware of this product. DO 712.05, 1.2.4 | <i>Product removed from unit and stored in Complex warehouse.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|--|--|-----------------|
| Complex | Weapons - Interview the Senior Firearms Instructor and ask him/her if they have a list of CO's by unit who have not qualified with at least the service handgun and shotgun and familiarized with the gas gun. | Lt Baird, Senior Firearms Instructor, does not maintain a current list of COs who have not qualified with the service handgun and shotgun and are not familiar with the gas gun. DO 510.01, 1.1 | <i>Corrected; list on file.</i> | 4/12/2011 |
| Complex | Weapons - Is there a list of employees, other than those in the Correctional Officer Series, who need to be qualified? If so, are these employees identified and approved by the Complex Warden? | Lt. Baird, Senior Firearms Instructor does not have a list of non-CO series employees who need to be qualified. If someone wants to qualify, he receives an email from the employee's supervisor and schedules them for the range. He does not channel the request through the Warden's office. DO 510.01, 1.3 | <i>Corrected and memorandum submitted to the Warden for review and determination.</i> | 4/12/2011 |
| Complex | Weapons - Review all instructor files. Did all Firearms Instructors meet the minimum requirements during the application process? | Lt. Baird, Senior Firearms Instructor, and CO II Reardon, Firearms Instructor, do not have a current certification in CARE on file. DO 510.02, 1.1.5 - 1.1.5.9 | <i>Corrected; current certification in file.</i> | 4/12/2011 |
| Complex | Weapons - Did all Firearm Instructors meet the requirements during the certification process? | A review of five firearms instructor files indicates one file is missing the Firearms Instructor Application 510-10 form. DO 510.02, 1.2.5 - 1.2.6 | <i>A meeting was conducted on March 15, 2011 with all Firearms Instructors to review files and ensure appropriate documentation is included.</i> | 4/22/2011 |
| Complex | Weapons - Review the training records of the current Firearms Instructors; have they have completed the Qualification/Re-qualification Firearms course and a Chemical Agents Familiarization class annually? | The review of five firearms instructors files revealed they do not contain documentation to verify attendance of a Chemical Agent Familiarization class since 2006. DO 510.02, 1.3.3 | <i>A meeting was conducted on March 15, 2011 with all Firearms Instructors to review files and ensure appropriate documentation is included.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|---|--|-----------------|
| Complex | Weapons - Review the training records of the current Senior Firearms Instructors to determine if they have completed the Qualification/Re-qualification Firearms course, Chemical Agents Familiarization and Use of Force class annually. | The review of Lt. Baird's Senior Firearms Instructor file revealed it does not contain documentation to verify attendance of a Chemical Agent Familiarization class since 2006. DO 510.02, 1.1.2 | <i>Corrected; on file.</i> | 4/12/2011 |
| Complex | Weapons - Does the Senior Firearms Instructor complete annual evaluations and maintain individual files on each of the Firearms Instructors? | A review of the firearms instructor files indicated the annual evaluations are not being completed nor are records being maintained for each instructor. DO 510.04, 1.2.2 | <i>Completed and updated.</i> | 4/12/2011 |
| Complex | Weapons - Review the CCW logs. Are all records up to date, and include staff who stored weapons on-site the date of the inspection? | Two Officers (Moreno - 2/6 & Price - 2/13) did not sign the log when they retrieved their weapons and Officer (Danbeck - 2/4) only entered his name on the log. DO 510.06, 1.5.4.1 | <i>Staff re-directed on policy and procedures.</i> | 4/12/2011 |
| Complex | Required Services - Is outgoing inmate mail stamped on the front of the envelope with a commercial stamp reading "Inmate Mail Arizona Department of Corrections"? | Outgoing mail was not stamped, labeled or otherwise marked "Inmate Mail Arizona Department of Corrections". DO 914.05, 1.1.4 | <i>A stamp was ordered and received for Complex Mail and Property.</i> | 4/12/2011 |
| | | | | |
| Cheyenne | Classification - Review DI95 screen for C0301 and C0401 appointments. Are any out of date? | C03 appointment out of time frames (Sanchez 201697) DO 801.04, 1.2.3 | <i>Corrected; staff re-directed and trained.</i> | 4/12/2011 |
| Cheyenne | Count Movement - Does the shift supervisor or commander review and sign all formal count sheets? | The Cheyenne Unit count sheets being used for count at 1100 hours included the count for 0400 on 02/14/2011. The graveyard supervisor had not signed the count sheets after the 0400 count had cleared on any of the count sheets being used on the unit for the 1100 count. DO 701.04, 1.4 | <i>Completed; staff re-directed and trained. COS review daily.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|---|--|-----------------|
| Cheyenne | Ingress/Egress - Does the officer consistently inspect incoming property for possible contraband? | Staff store items were brought in to the unit and were not required to be brought through the scanner or to be physically searched. DO 513.01 1.4 | Staff re-trained. | 4/12/2011 |
| Cheyenne | Ingress/Egress - Is the assigned officer aware of items which constitute prohibited personal property, such as cellular phones, and hand cuff keys? | Staff working in the lobby were unaware inspections staff on "travel status" were able to bring in more than \$20. DO 513.01, 1.6.7.2 | Staff re-trained. Post Order updated. | 4/12/2011 |
| Cheyenne | Ingress/Egress - Are all staff entering the unit required to pass through a metal detector while being observed by the assigned officer? | Staff working the lobby were not watching the incoming staff clear the metal detector. The staff were too involved in checking the personal property. DO 708.02, 1.1.6 | Staff re-trained. | 4/12/2011 |
| Cheyenne | Ingress/Egress - Evaluate procedure for inspecting food items staff members are attempting to introduce to the unit. Does the unit procedure provide clear guidelines for assigned staff? | The Post Order does not provide any guidelines for the inspection of food items or their need to be carried through the metal detector. DO 513.02, 1.5 | Staff re-trained. Post Order updated. | 4/12/2011 |
| Cheyenne | Ingress/Egress - Do assigned staff members inspect / search all personal property to include food items, and require applicable items to be carried through the metal detector by the owner? | Food items were not required to be carried through the metal detector. DO 513.02, 1.5 | Staff re-trained. | 4/12/2011 |
| Cheyenne | Keys/Radios - Does the unit have an accurate Master Key Inventory * Review Master Key Inventories and associated documentation for past 12 months. | There were 3 keys observed in key control office which were not on a key ring, tagged, or on the Master Inventory. Key control officer Hall did not know of their existence nor what they were to or when the keys were placed there. He stated this was the first time he had seen the keys. There was no IR to explain the keys being there. The keys were later found to belong to CDU. DO 702.02, 1.1 | Corrected; staff re-trained. Master Inventory updated. | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|--|--|-----------------|
| Cheyenne | Keys/Radios - Does the inventory match up with existing key stock on hand? Compare inventory with available keys. | Inventory of existing key stock does not match up with the Master key inventory. There were 3 Brink 301 keys in the key control room which were not accounted for and not on the Master inventory. Key control officer Hall stated he did not know when or why they were placed there or what they were to. DO 702.02, 1.1 | <i>Corrected; staff re-trained.</i> | 4/12/2011 |
| Cheyenne | Keys/Radios - Do key sets have attached tags with key ring number, and number of keys? Review a random sampling of key rings. | Inventory of existing key stock downs not match up with the Master key inventory. There were 3 keys in the key control room which were not accounted for and not on the Master inventory. They were Brink 3021 keys. Key control officer Hall stated he did not know when they were placed there, what they were or were for or why they were placed there. DO 702.02, 1.1 | <i>Corrected; staff re-trained.</i> | 4/12/2011 |
| Cheyenne | Keys/Radios - Is a Locksmith Work Order, Form 702-6 used when repair or replacement of key/key rings are required? | The form 702-6 is not used. Key control officer Hall uses form 403-2. DO 702.02, 1.2.2.1 | <i>Corrected; Form 702.6 is being utilized.</i> | 4/12/2011 |
| Cheyenne | Keys/Radios - Each time a key set is issued, or returned does the officer responsible make the appropriate entry in the Key and Credit Card Control sheet (Form 702-1) specifying at a minimum: Key number, date of issue/return, name of authorized staff member, initial? | Not all entries are made in all sections. The main observed discrepancy is missing information in the section specific to the key being returned. DO 702.02, 1.4.1.2 | <i>Corrected; staff retrained. COS review daily.</i> | 4/12/2011 |
| Cheyenne | Keys/Radios - If the unit has any permanently assigned keys is a Receipt of Permanent Issue Keys form 702-5 being used? | Staff are issued permanent keys for personal lockers. The staff do not complete form 702-5 for the key. Instead, they complete a unit generated memo showing they are assigned a permanent key for the unit. DO 702.02, 1.5.1 | <i>The majority of the locks were turned over to combination locks. If a key is required, Form 702.5 is completed.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|--|--|-----------------|
| Cheyenne | Keys/Radios - Are staff members maintaining control of keys signed out to them in their personal possession and control at all times and not left in office desks or other office storage areas? | Medical staff were observed leaving their office area with their assigned keys left on a table and unattended. This was also observed by Sgt. Rose and the medical officer. DO 702.02, 1.5.2 | Staff re-directed and training ongoing. | 4/12/2011 |
| Cheyenne | Keys/Radios - If the pharmacy or medical unit maintains keys are they kept in compliance with policy? | Medical staff were observed leaving their office area with their assigned keys left on a table and unattended. This was also observed by Sgt. Rose and the medical officer. DO 702.02, 1.5.2 | Completed; staff re-directed and training ongoing. | 4/12/2011 |
| Cheyenne | Keys/Radios - Does the Key Control Officer have written approval which demonstrates the Warden or designee approves of all key duplication in written format? | Key control officer Hall was asked for written approval of key duplication and was not able to produce any documents granting permission and could not speak to this question. DO 702.03, 1.1 | Staff re-trained. | 4/12/2011 |
| Cheyenne | Keys/Radios - Are the names of both employees logged in the Correctional Journal? | The Main control officer did not log into the service journal when the emergency key box was accessed during the inspection, or that any emergency keys were removed or replaced. DO 702.04, 1.4.2 | Staff re-directed and trained. | 4/12/2011 |
| Cheyenne | Keys/Radios - Is there a current Institutional Order addressing the procedural requirements for emergency Key Control? | Institutional Order on site was outdated and signed by Ivan Bartos on 6-15-2004. Key control officer Hall was not able to demonstrate knowledge of any updated Institutional Order. IMPLEMENTATION | Institutional Order updated as of January 26, 2011. | 4/12/2011 |
| Cheyenne | Keys/Radios - Are the radios serviceable and being utilized properly i.e. use of call signs, clear transmissions, no unnecessary conversation? | Radio call signs or codes were not observed as being regularly used. DO 104.06, 1.1.8 | Staff re-trained and supervisors to continue ongoing training. | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|--|--|-----------------|
| Cheyenne | Perimeters/Towers - Medium custody units- If the system has perimeter lighting, are all applicable lights operating, with no sign of visible damage, or wear? | While conducting an inspection of the Vindicator alarm system, it was noted one of the quartz lights on the north side of the perimeter would not come on when the zone was activated. It was reported the light had been reported as a security device deficiency prior to the inspection. TM 3.1.5.1.2 | <i>Maintenance repaired.</i> | 4/12/2011 |
| Cheyenne | Security Devices - Were appropriate entries made in the Correctional Service Journal? | Entries were inconsistent, did not include IR #s or action taken and were not carried over shift to shift. (DO 703.01, 1 1.2) | <i>Staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cheyenne | Security Devices - Has the unit / complex Chief of Security generated a canned statement which demonstrates a consistent approach to documenting security device inspections by all security staff throughout the unit / complex? | There is a canned statement in the post order but it is not consistently used to document SDIs. (DO 703.01, 1.3) | <i>Staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cheyenne | Security Devices - Does the Chief of Security maintain a current file of all documentation relating to inspections, maintenance requests, follow-up actions, and preventive maintenance programs within the institution/unit? | The log does not include the follow-up actions taken when an SDI deficiency is reported when it is repaired regardless of the timeframe. HU 7 Control Panel was repaired but was still on the log as unrepaired. (DO 703.01, 1.1.3) | <i>COS re-directed and training ongoing.</i> | 4/12/2011 |
| Cheyenne | Security Devices - Does the Chief of Security ensure SDI work order log repairs are made within time frames? | SDIs have been found to have not been repaired from May 2010 to Sept 2010. (DO 703.01, 1.4.4) | <i>Parts on order; repaired once parts received.</i> | 4/12/2011 |
| Cheyenne | Tools - Are tool stored in a secure area, inaccessible to inmates? | Wheel barrows outside of the tool room were observed unsecured. The cable which secures them was not locked, or ran through the legs of the tools to keep them in place. Inmates were around the tool room. DO 712.01, 1.1 | <i>Completed; staff re-directed and trained.</i> | 4/12/2011 |
| Cheyenne | Tools - Are flammable / hazardous items stored within storage areas which comply with fire and safety codes? | There was spray paint stored in a non flammable cabinet in the key control office with no observed MSDS available. DO 712.05, 1.1.4 | <i>Removed and properly stored; MSDS available.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|---|--|-----------------|
| Cheyenne | Tools - Are inventory sheets placed in all areas where tools are stored within the authorized location? | There were no observed inventory sheets located where the lawn mowers were stored. DO 712.02, 1.2.1.4 | <i>Corrected; inventory sheets available.</i> | 4/12/2011 |
| Cheyenne | Tools - Are unserviceable tools removed, and new tools added to the master inventory using the Tool Disposition (Form 712-6)? | Tool room officer Villafana stated he had broken drill bits over a week ago. The drill bits were still in the drill index. There was no Information Report written or Tool Disposition form completed. They were also still listed on the Master tool inventory. DO 712.02, 1.2.1.6 | <i>Corrected; removed from inventory.</i> | 4/12/2011 |
| Cheyenne | Tools - Are unserviceable tools disposed of appropriately, as prescribed in D.O. 304 Equipment and Inventory System? | Unserviceable tools are still on inventory. DO 712.02, 1.2.1.6 | <i>Corrected; items removed from inventory.</i> | 4/12/2011 |
| Cheyenne | Tools - Are Class A tools issued and utilized under staff supervision, at all times? | Class A hose was issued to inmate Hudson on tool check out form. This same inmate was later observed with the water hose walking on the yard without any observed supervision. DO 712.02, 1.3.1.1 | <i>Staff re-directed and trained.</i> | 4/12/2011 |
| Cheyenne | Tools - Are all shadow boards accessible to inmates stored behind a secure barrier of expanded metal, or like material, with the entryway secured with a locking device? | Inmates were around a storage area that had wheel barrows not secured behind a secured barrier. DO 712.02, 1.4.4 | <i>Corrected.</i> | 4/12/2011 |
| Cheyenne | Tools - Evaluate the after hours tool check out procedure for the unit. Do staff access the tool room, check out tools, and return the tools as per existing unit tool control procedures? | A review of 30 day tool check out forms revealed after hours staff do not sign in or complete the tool check out form. DO 712.02, 1.5.1.1.1 | <i>Staff re-directed and training ongoing. COS is reviewing daily.</i> | 4/12/2011 |
| Cheyenne | Tools - Where medical tools cannot be engraved, is the serial number used for identification? | No serial numbers were used to identify un-engraved tools. Only a description of the tool was used. DO 712.03, 1.2.2 | <i>Corrected, serial numbers are utilized.</i> | 4/12/2011 |
| Cheyenne | Tools - Are updated MSDS sheets found at all storage locations, for all products found inside the storage site? | Spray paint cans were located inside a cabinet in the tool control office. There were no MSDS sheets available for viewing from the tool room officer. DO 712.05, 1.1.4 | <i>Item removed and properly stored; MSDS available.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|--|---|-----------------|
| Cheyenne | Tools - Are all restricted products issued from a central warehouse / storage location, where the products are inventoried using a gross maximum weight protocol? | Powdered bleach was found in the units vehicle sally port with no inventory form. The units storage area for restricted product is located inside of the unit not at the sally port. DO 712.05, 1.2.1 | <i>On the inventory form and stored in the sallyport. MSDS available.</i> | 4/12/2011 |
| Cheyenne | Weapons - Are staff members who are checking the seal on the DART locker at the beginning of each work shift and its condition documenting their findings in a Correctional Service Journal? | Log entries do not include the condition of the seal. (DO 716.06, 1.6.2.1) | <i>Staff re-directed and trained.</i> | 4/12/2011 |
| Cheyenne | Detention Services - Inspect detention facility (including cells). Is the area clean and sanitary? | Porters closets were dirty. (Mops on floor not hung up, 6-12 dirty towels on the floor, mop bucket had dried dirt in the corners and there was dirt and debris .5 to 1 inch thick on the floor.) Four of ten cells observed where needing to be cleaned. CO II Franco and CO II Mora where in attendance during the inspection. DO 804-01, 1.2.6 | <i>Addressed; staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cheyenne | Detention Services - Observe a sanitation inspection during a shift. Are all areas in the unit inspected during the shift? | Inspections were not being conducted during shift which was evident by the amount of fishing lines, items on the wall and plastic bottles of water on the floor. CO II Franco and CO II Mora where in attendance during the inspection. DO 804-01, 1.9 | <i>Addressed; staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cheyenne | Detention Services - Interview staff on procedures in response to an inmate suicide situation. Are guidelines followed? | When COII Mora, Franco and Juarez were interviewed, no one knew the procedures or guidelines to follow in response to an inmate suicide situation. DO 807.03, 1.1, and 1.2 | <i>Staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cheyenne | Detention Services - Review historical records for proper documentation. Does the record indicate staggered observation times within the required time frames to include at shift change? | When observation records from 1/1/11 through 2/15/11 were reviewed, there were several instances when times were not staggered. DO 807.05, 1.2.6 | <i>Staff re-directed and trained.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|---|---|-----------------|
| Cheyenne | Detention Services - Review historical records for proper documentation. Does the record indicate staggered observation times within the required time frames to include at shift change? | Reviewed I/M Sabir, Ten Minute Watch, Jan 23-25, 2011. Observation times were not staggered. DO 807.05, 1.3.4 | Staff re-directed and training ongoing. | 4/12/2011 |
| Cheyenne | Detention Services - Review the records; has the mental health care staff or medical health care staff conducted daily evaluations as required? | Reviewed I/M Sabir, Ten Minute Watch, Jan 23-25, 2011. There was no record of mental health care or medical health care staff conducting daily evaluations. DO 807.05, 1.3.6 | Filled vacant Mental Health position. | 4/12/2011 |
| Cheyenne | Detention Services - Are new forms (Mental health Disposition and Observation Record) initiated when changes are made in a watch status? | Reviewed I/M Sabir record of mental health care or medical health care staff conducting daily evaluations.; The observation record was changed from a Continuous Watch then to a Ten Minute Watch without being documented on a new Mental Health Disposition Form. DO 807.05, 1.12 | Staff re-trained to ensure appropriate forms are completed. | 4/12/2011 |
| Cheyenne | Detention Services - Are the completed Observation Records submitted for the shift commander's signature at the end of every shift? | Reviewed 53 Observation Records with Lt. McCormick. 28 were not signed by the shift commander. DO 1103.07, 1.4.2 | Shift commanders re-directed and trained. | 4/12/2011 |
| Cheyenne | Detention Services - Are security staff documenting a visual check of the inmate every thirty minutes or as otherwise specified by the mental health watch order? | Security staff are not staggering their visual checks on the Observation record as ordered on the mental health watch order. DO 1103.07, 1.8.5 | Staff re-directed and training ongoing. | 4/12/2011 |
| Cheyenne | Inmate Services - Does the Unit have a Post Order #43 Urinalysis Security Officer? | Capt. Thompson stated the unit does not have Post Order #43 Urinalysis Security Officer. (No Policy Reference) | Post Order in place. | 4/12/2011 |
| Cheyenne | Inmate Management - Are Class C Violations disposed of within five work days of the filing date of the violation? | Sgt. Ruiz indicated Class C Violations are disposed of within 7 work days. DO 803.05, 1.1.1 | Staff re-directed and DHO conducted training on March 16, 2011. | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|---|--|-----------------|
| Cheyenne | Inmate Management - If any cases which have been dismissed are located during the review, review the inmate file, AIMS file. Have all references of the dismissed case been removed from the inmate file and AIMS? | In review of AIMS screen DI46, at the time of inspection I/M Mondragon's file, # 136718F, indicated a guilty charge even though the case had been dismissed. DO 803.10, 1.2 | Staff re-directed and DHO conducted training on March 16, 2011 | 4/12/2011 |
| Cheyenne | Required Services - If the sender cannot be verified, does the inmate receive a notice and the mail held for 90 days before it is | COII Carlon stated unverifiable mail is held for 30 days and then destroyed. DO 914.02, 1.3 | Staff re-directed and trained. | 4/12/2011 |
| Cheyenne | Required Services - Did receiving unit sign for inmate's property? | Of the 1% reviewed files, two had no signatures in the received column. DO 909.05, 1.10 | Staff re-directed and trained. | 4/12/2011 |
| Cheyenne | Required Services - Is the inmate's ADC number engraved on the television in 2 visible locations? Are all other appliances in 1 visible location | ADC numbers on two observed televisions had only one set of engraved numbers. When COII Carlon was questioned he advised he only engraves one location. DO 909.06, 1.4.4 | Completed; staff re-trained. | 4/12/2011 |
| Cheyenne | Required Services - Are property files maintained in terminal digit order? | Property files are stored in numerical order using the first three ADC numbers. DO 909.10, 1.7 | Corrected; staff re-directed and trained. | 4/12/2011 |
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| Cibola | Classification - Does a staff member initiate the reclassification on the DI61 AIMS screen upon approval from the Deputy Warden or designee? | For I/M Scrivner 213720, no DI 61 entries had been created yet during the time of the inspection. DO 801.04, 1.2.4 | Corrected. | 4/12/2011 |
| Cibola | Classification - Does a Correctional Officer IV assign inmates to Education, Treatment and Work Based Education (WBE) programs in accordance with the inmate's individual Corrections Plan, the applicable facility priority ranking report(s) and actual vacancies in work assignments | COIV did not use Corrections Plans or priority ranking report for assigning inmates. DO 903.03, 1.1.2 | Staff redirected and using ICP and priority ranking by COIV. | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|--|---|-----------------|
| Cibola | Food Service - Review Correctional Service Journal entries relating to inspections of kitchen workers. Do the entries for inmates not meeting requirements noted by inmate name and ADC #? | In review of Correctional Journal dated 2/23/11, all inmates met requirements. However, when Officer Urquijo was asked what kind of documentation is done, he could not speak to the question. TM 912.01, 1.1.3.1 | <i>Staff re-directed and trained.</i> | 4/12/2011 |
| Cibola | Food Service - Are inmates on approved Restricted Diets being fed separately from the general population? | Mr. Cunanan indicated inmates on restricted diets are served with the general population. TM 912.07, 1.1 | <i>Inmates on approved restricted diets are fed separately from the general population.</i> | 4/12/2011 |
| Cibola | Ingress/Egress - Does the assigned officer question each person attempting to enter the unit in regard to possession of contraband items? | Sergeant Herreara on swing shift was allowed to bring in a large black bag which was neither clear or mesh. DO 513.01, 1.6.1.4 | <i>The item was approved on the Sergeant's personal property sheet.</i> | 4/12/2011 |
| Cibola | Ingress/Egress - Does the officer consistently inspect incoming property for possible contraband? | Staff working the lobby did not inspect Jackets at the ingress point. DO 513.01, 1.4 | <i>Staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cibola | Ingress/Egress - Are all staff entering the unit required to pass through a metal detector while being observed by the assigned officer? | The metal detector was activating randomly when no staff were passing through, and lobby staff were aware the metal detector was not working properly. Lobby staff would wait to see the visual indicator to go back to green then tell staff to hurry through before the metal detector activated again. Additionally the cart holding the mail was not inspected when rolled through the scanner by the Mail and Property officer. DO 708.02, 1.1. | <i>Staff re-directed and training ongoing. Carts are inspected. Maintenance reviewed metal detector and working properly.</i> | 4/12/2011 |
| Cibola | Ingress/Egress - Evaluate procedure for inspecting food items staff members are attempting to introduce to the unit. Does the unit procedure provide clear guidelines for assigned staff? | Visitation Post Order does not provide any guidelines for the inspection of food items or their need to be carried through the metal detector. DO 513.02, 1.5 | <i>Post Order for Ingress/Egress contains verbiage.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|---|--|-----------------|
| Cibola | Ingress/Egress - Do assigned staff members inspect / search all personal property to include food items, and require applicable items to be carried through the metal detector by the owner? | Food items were not required to be carried through the metal detector. DO 513.02, 1.5 | <i>Staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cibola | Keys/Radios - Does the inventory list the number of keys available for each lock/locking device? | The key control officer Gilg does not list the number of available keys for each lock or locking device on the Master key inventory. DO 702.02, 1.1.3 | <i>Corrected; Chief of Security and staff re-directed and trained.</i> | 4/12/2011 |
| Cibola | Keys/Radios - Does the unit have a monthly report on file showing the inspection and inventory of keys/key rings, emergency keys/key rings and locking devices? | The monthly reports do not show which month the keys were inspected. All reports have the same date on them. Key control officer Gilg stated he does not change the report unless there is a change to be made with a key so he uses the same report each month. DO 702.02, 1.2.2 | <i>Corrected; staff re-directed and trained.</i> | 4/12/2011 |
| Cibola | Keys/Radios - Are the names of both employees logged in the Correctional Journal? | Main control officer did not log into the service journal the emergency key box was accessed during the inspection or any emergency keys were removed or replaced. DO 702.04, 1.4.2 | <i>Corrected; staff re-directed and trained. Post Order revised.</i> | 4/12/2011 |
| Cibola | Keys/Radios - Are all manufacturer numbers removed from each emergency key so as to not identify the key? | Key set E5 key A has E577 still on the key and the manufacturer number has not been ground off or removed. DO 702.04, 1.8 | <i>Completed.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|---|---|-----------------|
| Cibola | Perimeters/Towers - Medium Custody units- Do the lights in the adjacent zones to either side of the alarmed zone activate when an alarm condition triggers the quartz lights associated with the alarmed zone? Interview random staff assigned to the control room to determine action taken when an alarm is activated. (Ensure lights are not program to prevent activation during daylight hours. Also ensure adjacent zones are programmed to come on during dark hours, if applicable.) | Zone 17 of the Cibola perimeter fence shaker wire would not alert during the inspection and would not activate the corresponding quartz lights. TM 3.1.5.12 | <i>Norment called and corrected the same day.</i> | 4/12/2011 |
| Cibola | Security Devices - Were appropriate entries made in the Correctional Service Journal? | Entries did not include description of problem and was not identified as a Security Device deficiency. (DO 703.01, 1.1.2) | <i>Staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cibola | Security Devices - Has the unit / complex Chief of Security generated a canned statement which demonstrates a consistent approach to documenting security device inspections by all security staff throughout the unit / complex? | The statement in the Post Order does not match the requirements of the Institutional Order, and staff are inconsistently logging SDIs. (DO 703.01, 1.3) | <i>Post Order revised to mirror the same requirements as the Institutional Order. Chief of Security and staff re-directed and ongoing training for redundant systems.</i> | 4/12/2011 |
| Cibola | Security Devices - Does the Chief of Security maintain a current file of all documentation relating to inspections, maintenance requests, follow-up actions, and preventive maintenance programs within the institution/unit? | The SDI file documentation does not include follow-up actions. (DO 703.01, 1.1.3) | <i>COS re-directed and trained.</i> | 4/12/2011 |
| Cibola | Security Devices - Does the Chief of Security ensure SDI work order log repairs are made within time frames? | Log entry dated 2/9/11 - lock on 530A broken - no follow-up action documented. (DO 703.01, 1.4.4) | <i>Corrected; COS re-directed and trained.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|--|---|-----------------|
| Cibola | Tools - Are tool stored in a secure area, inaccessible to inmates? | Tool room was observed by B.A. Kyle Fouts, ASOI Lewis and Lt. Wyrick as being open and not secure. There was an inmate who exited the tool room with no security staff present. DO 712.01, 1.1 | <i>Staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cibola | Tools - Observe posted inventory sheets. Compare inventory with stored tool. Is the inventory accurate? | Drill bit sets do not have engraved #'s on each tool. The tool box itself has "71 pieces" engraved on the box. The Master inventory reports there are 65 pieces assigned to the tool box. DO 712.02, 1.2.3.1 | <i>Corrected and each area consistent.</i> | 4/12/2011 |
| Cibola | Tools - Did the officer ensure all appropriate documents were completed? | Tool room officer Worthen did not update the Master tool inventory to reflect the proper number of observed drill bit set discrepancies. DO 712.02, 1.2.1.6 | <i>Corrected and each area consistent.</i> | 4/12/2011 |
| Cibola | Tools - Are all tools permanently engraved/stamped and color-coded using the applicable units assigned color? | Socket sets, fans and level are not engraved. Tile saw belonging to AWC/WBE is not color coded. DO 712.02, 1.2.1.5 | <i>Corrected.</i> | 4/12/2011 |
| Cibola | Tools - Is the tool control officer is the only staff who permanently engraves/stamps and color-codes tools. | Tool control officer Worthen stated the warehouse porters / clerks engrave class A and B tools. DO 712.02, 1.2.1.5 | <i>Corrected, staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cibola | Tools - Are Class A tools issued and utilized under staff supervision, at all times? | An inmate was observed by two auditors and unit Lieutenant Wyrick in the tool room unsupervised. The A and B sections were both unsecured. DO 712.02, 1.3.1.1 | <i>Staff re-directed and training on-going.</i> | 4/12/2011 |
| Cibola | Tools - Are all shadow boards accessible to inmates stored behind a secure barrier of expanded metal, or like material, with the entryway secured with a locking device? | Class A and B tool areas were observed unsecured with no security staff present in the area. As Lt. Wyrick and two auditors arrived at the tool room area, an inmate was observed in the tool room and exiting the tool room. DO 712.02, 1.4.4 | <i>Staff re-directed and training ongoing.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|---|---|-----------------|
| Cibola | Tools - Is the tool room storage area considered a restricted location where inmates are not allowed to be assigned to work? | Class A and B tool areas were observed being unsecured with no security staff present in the area. As Lt. Wyrick and two auditors arrived at the tool room area, an inmate assigned as a clerk to the warehouse was observed in the tool room and was exiting the tool room. DO 712.02, 1.5.2 | <i>Staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cibola | Tools - Are updated MSDS sheets found at all storage locations, for all products found inside the storage site? | There was a Portable Toilet Treatment found in the warehouse/tool room area. Later when speaking with OSC II Duffy, he stated he did not have a copy of the MSDS sheet for this product and was not aware they were "servicing their own toilets". DO 712.05, 1.1.4 | <i>Item removed from unit and stored in Warehouse. MSDS sheet available.</i> | 4/12/2011 |
| Cibola | Tools - Are restricted products controlled by limiting access to staff only, and securing the products at all times when not in use? | Restricted products are not controlled on-site. The products are stored in the area adjacent to the tool room, still in the manufactures boxes stacked against the wall and not secured. During the inspection, it was observed by two auditors and Lt. Wyrick the warehouse and tool room area was left unsecured with no staff member present. An inmate was observed in the warehouse and tool room and was leaving the area where restricted products were being stored. DO 712.02, 1.2 | <i>Item removed from unit and stored in Warehouse. MSDS sheet available. Staff re-directed and trained.</i> | 4/12/2011 |
| Cibola | Tools - Does a file exist in the institutions warehouse which has each products name, date received, quantity received and list of trained staff to use each product? | No MSDS sheet for blue toilet cleaner. DO 712.05, 1.2.4 | <i>Corrected; MSDS sheet available.</i> | 4/12/2011 |
| Cibola | Inmate Management - Do staff members respond to inmate letters using an Inmate Letter Response, Form 916-2, which is available on the ADC Net within 24 hours on issues deemed as an emergency? | When CO IV Warren was asked this question, he indicated issues deemed an emergency require a 3 day response time. DO 916.03, 1.4.1 | <i>Staff re-directed and trained.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|---|---|-----------------|
| Cibola | Inmate Management - Do staff members ensure that any issue raised by an inmate for which there is an alternative method of correcting, the issue is correctly dealt with by the inmate? | When asked CO IV Warren what other alternative methods exists, he could not speak to this. DO 916.03, 1.4.2 | Staff re-directed and trained. | 4/12/2011 |
| Cibola | Inmate Management - Is appropriate action taken when an inmate abuses the grievance system? | COIV Warren was asked this question and could not speak to it. DO 802.07, 1.2.1.1-1.2.2 | Staff re-directed and trained. | 4/12/2011 |
| Cibola | Inmate Management - Did the Grievance CO IV coordinator conduct and adequate investigation of the property loss claim during the grievance process? | When asked how property loss claims are handled, CO IV Warren could not speak to this. DO 909.09, 1.2.1.2.2, 1.4-1.4.3 | Staff re-directed and trained. | 4/12/2011 |
| Cibola | Inmate Management - If the sanctions include revocation of a suspension, does the Disciplinary Hearing Officer complete the appropriate documentation? | When asked how a revocation of suspension is handled, Sgt. Cruz could not speak to this. DO 803.08, 1.6-1.6.3 | Staff re-directed and trained. | 4/12/2011 |
| Cibola | Required Services - Of the files reviewed, does every 911-1 have the potential visitors full name, date of birth, address, phone number and relationship filled out? | Of the 1% reviewed files, four were missing phone numbers and social security numbers on form 911-1 DO 911.01, 1.1.2 | Staff re-directed and training ongoing in file review audits. (Social Security numbers not required.) | 4/12/2011 |
| Cibola | Required Services - Are applications stamped "Received" including the date on the reverse side? | Of the 1% of the reviewed files one application was missing the received stamp. Cibola received the application. DO 911.01, 1.3.1 | Corrected. | 4/12/2011 |
| Cibola | Required Services - Are they approved only by the Deputy Warden? | Documentation shows ADW Bayless is the approving authority for special visits. DO 911.05, 1.7.1 | Corrected; DW is approving authority. | 4/12/2011 |
| Cibola | Required Services - Did receiving unit sign for inmate's property? | Of the 1% of the reviewed files five files had no signatures in the received column. DO 909.05, 1.10 | Staff re-directed and trained. | 4/12/2011 |
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| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|--|---|-----------------|
| Cocopah | Classification - Does the CO IV ensure inmates have the opportunity to attend GED after functional literacy is earned and space is available in the class? | Per COIII Higgins, teachers are deciding who is enrolled in the classes. DO 903.02, 1.3.1.1.1 | <i>Priority Ranking report is used and coordinated with Education.</i> | 4/12/2011 |
| Cocopah | Classification - Does a Correctional Officer IV assign inmates to Education, Treatment and Work Based Education (WBE) programs in accordance with the inmate's individual Corrections Plan, the applicable facility priority ranking report(s) and actual vacancies in work assignments? | Per COIII Higgins, the teachers of the respective classes decide who is enrolled. DO 903.03, 1.1.2 | <i>Priority Ranking report is used and coordinated with Education.</i> | 4/12/2011 |
| Cocopah | Count Movement - Does the shift supervisor or commander review and sign all formal count sheets? | The shift supervisors at the Cocopah Unit do not sign the counts sheets utilized at any Formal Count. The Shift Supervisors only sign a copy of the cover sheet utilized for clearing the count. DO 701.04 | <i>Corrected; staff redirected and trained.</i> | 4/12/2011 |
| Cocopah | Food Service - Review Correctional Service Journal entries relating to inspections of kitchen workers. Do the entries for inmates not meeting requirements noted by inmate name and ADC #? | When asked what happens when an inmate has open sores, Officer Simpson indicated the inmate would not be allowed to work, and medical would be notified. However, he could not speak to how this issue would be documented in the correctional journal. TM 912.01, 1.1.3.1 | <i>Corrected; staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cocopah | Ingress/Egress - Evaluate procedure for inspecting food items staff members are attempting to introduce to the unit. Does the unit procedure provide clear guidelines for assigned staff? | The Post Order does not provide any guidelines for the inspection of food items or their need to be carried through the metal detector. DO 513.02, 1.5 | <i>Corrected; Post Order revised. Staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cocopah | Ingress/Egress - Do assigned staff members inspect / search all personal property to include food items, and require applicable items to be carried through the metal detector by the owner? | Food items were not required to be carried through the metal detector. DO 513.02, 1.5 | <i>Corrected; staff re-directed and training ongoing.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|---|--|-----------------|
| Cocopah | Keys/Radios - Is a Locksmith Work Order, Form 702-6 used when repair or replacement of key/key rings are required? | Key control officer Garcia stated he uses a memo to request a new key instead of the required 702-6 form. DO 702.02, 1.2.2.1 | <i>Corrected; staff re-directed and Form 702-6 is being utilized.</i> | 4/12/2011 |
| Cocopah | Keys/Radios - Are the names of both employees logged in the Correctional Journal? | Main control officer did not log into the service journal the emergency key box was accessed during the inspection or any emergency keys were removed or replaced. DO 702.04, 1.4.2 | <i>Staff re-directed and training ongoing. Supervisors conducting spot checks to ensure policy compliance.</i> | 4/12/2011 |
| Cocopah | Keys/Radios - Are all manufacturer numbers maintained in the master key inventory? | Manufacturer numbers are not maintained in the Master key inventory. DO 702.04, 1.8 | <i>Completed; maintained in master key inventory.</i> | 4/12/2011 |
| Cocopah | Security Devices - Has the unit / complex Chief of Security generated a canned statement which demonstrates a consistent approach to documenting security device inspections by all security staff throughout the unit / complex? | The statement in the Post Order does not match the requirements of the Institutional Order. (DO 703.01, 1.3) | <i>Corrected; Post Order revised.</i> | 4/12/2011 |
| Cocopah | Security Devices - Does the Chief of Security maintain a current file of all documentation relating to inspections, maintenance requests, follow-up actions, and preventive maintenance programs within the institution/unit? | The follow-up actions taken from when an SDI deficiency is reported to when it is repaired are not documented. (DO 703.01, 1.1.3) | <i>Corrected; COS re-directed and trained.</i> | 4/12/2011 |
| Cocopah | Tools - Has the Chief of Security ensured a monthly reconciliation has been conducted of all authorized Tool Control Storage areas? | Master tool inventory was not correct from 10/2010 until 01/2011 indicating the Chief of Security was not reconciling the Master tool inventory on a monthly basis. There was no individual inventory sheets observed for each barber box. DO 712.02, 1.2.3.2 | <i>Corrected; paint roller (broken) removed from inventory.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|--|--|-----------------|
| Cocopah | Tools - Are tool stored in a secure area, inaccessible to inmates? | Tool room officer Lopez stated he has a clerk, (I/M Banelly) who cleans the tool room and helps account for the tools. Lopez stated the inmate conducts the initial count of all tools and he conducts the end of the day inventory. DO 712.02, 1.5.2 | <i>Staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cocopah | Tools - Are tools stored on a shadow board with shadow that closely resembles the tool? | Gloves are not shadowed in the shape of the glove. They are shadowed with a square much larger than the gloves stored there. Hedge trimmers are shadowed with a shape of a triangle. Not all observed silhouettes match the shape of the tool stored in place. There were also round and square shovels observed stored on the same hook. DO 712.02, 1.4.1 | <i>Corrected and completed. Tools are shadowed accordingly.</i> | 4/12/2011 |
| Cocopah | Tools - Are inventory sheets placed in all areas where tools are stored within the authorized location? | Inventory sheet for outside tool room is not stored with the tools but kept in the main tool room. DO 712.02, 1.2.1.4 | <i>Corrected and inventory sheets are posted where tools are stored.</i> | 4/12/2011 |
| Cocopah | Tools - Observe posted inventory sheets. Compare inventory with stored tool. Is the inventory accurate? | Tools do not match the posted inventory sheet. Paint roller removed 10/2010 per the inventory sheet. 11/2010 inventory did not list any paint rollers. 1/2011 inventory listed 3 paint rollers. Physical inventory showed 4 rollers in place. DO 712.02, 1.2.1.5 | <i>Corrected; paint roller (broken) removed from inventory.</i> | 4/12/2011 |
| Cocopah | Tools - Did the officer ensure all appropriate documents were completed? | Tool room officer Lopez did not update the Master tool inventory to reflect the proper number of observed paint roller tool discrepancies. DO 712.02, 1.2.1.6 | <i>Corrected; paint roller (broken) removed from inventory.</i> | 4/12/2011 |
| Cocopah | Tools - Are all tools permanently engraved/stamped and color-coded using the applicable units assigned color? | There were 2 sewing machines and a pair of 4 inch scissors in the mail and property room not engraved or color coded. DO 712.02, 1.2.1.5 | <i>Completed; engraved and/or color coded.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|---|--|-----------------|
| Cocopah | Tools - Does the Chief of Security or designee reconcile the Master Tool Inventory on a monthly basis? | Master tool inventory was not correct from 10/2010 until 01/2011 indicating the Chief of Security was not reconciling the Master tool inventory on a monthly basis. There were no individual inventory sheets observed for each barbers box. DO 712.02, 1.2.3.2 | <i>Corrected; paint roller (broken) removed from inventory.</i> | 4/12/2011 |
| Cocopah | Tools - Are all shadow boards clean, and clearly marked with silhouettes closely mirroring the tools to allow for easily visual inspection and inventories? | Gloves are not shadowed in the shape of the glove. They are shadowed with an oversized square larger than the gloves. Hedge trimmers are shadowed with a shape of a triangle. Not all observed silhouettes match the shape of the tool stored in place. There were also round and square shovels observed stored on the same hook. DO 712.02, 1.4.1 | <i>Corrected and completed. Tools are shadowed accordingly.</i> | 4/12/2011 |
| Cocopah | Tools - Is the tool room storage area considered a restricted location where inmates are not allowed to be assigned to work? | Tool room officer Lopez stated his assigned I/M clerk (Banelly) cleans the tool room and helps account for the tools. Lopez stated the I/M conducts the initial count of all tools and he conducts the end of the day inventory. DO 712.02, 1.5.2 | <i>Staff re-directed and training ongoing.</i> | 4/12/2011 |
| Cocopah | Tools - Where medical tools cannot be engraved, is the serial number used for identification? | No serial numbers were used to identify un-engraved tools. Only a description of the tool was used. DO 712.03, 1.2.2 | <i>Corrected; serial numbers are being utilized.</i> | 4/12/2011 |
| Cocopah | Tools - Are tools, and instruments in long term storage sealed in tamper proof containers, locked with a break away seal, and the seals checked daily by staff responsible for conducting inventories? | In medical, break away seals were not used for tool stored in long term storage which was sealed in tamper proof containers. DO 712.03, 1.4.5 | <i>Corrected; staff re-directed on appropriate procedures.</i> | 4/12/2011 |
| Cocopah | Tools - Are there clearly marked "sharps" disposal units located within the health services areas, which are considered tamper proof, and not accessible by inmates? | Disposable sharps units are not considered tamper proof. The medical staff stated they empty the containers into the bio hazard containers when they are full and reuse the containers. DO 712.03, 1.4.8 | <i>Corrected; all disposable sharps containers are tamper proof and disposed of when full.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|---|---|-----------------|
| Cocopah | Tools - Are updated MSDS sheets found at all storage locations, for all products found inside the storage site? | There was no MSDS sheet found on site for Assure liquid pre-soak and silver detarnisher. DO 712.05, 1.1.4 | <i>Corrected; MSDS sheet available.</i> | 4/12/2011 |
| Cocopah | Inmate Management - If the sanctions include revocation of a suspension, Does the Disciplinary Hearing Officer complete the appropriate documentation? | When asked how a revocation of suspension is handled, Sgt. Vazquez could not speak to this. DO 803.08, 1.6-1.6.3 | <i>Staff re-directed and DHO conducted training on March 16, 2011.</i> | 4/12/2011 |
| Cocopah | Required Services - Are applications stamped "Received" including the date on the reverse side? | Of the 1% reviewed files, one application was missing the received stamp. DO 911.01, 1.3.1 | <i>Corrected; staff re-directed and trained.</i> | 4/12/2011 |
| Cocopah | Required Services - Is the visitation schedule posted in the registration, visitation and inmate housing areas? | There were no Visitation Schedules posted in the inmate housing unit. The billboard had only the housing requirement pictures and the meal calendar. DO 911.10, | <i>Corrected; visitation schedules posted in housing units.</i> | 4/12/2011 |
| Cocopah | Required Services - Did receiving unit sign for inmate's property? | Of the 1% of reviewed files, one had no signatures in the received column. DO 909.05, 1.10 | <i>Corrected; staff re-directed and trained. Supervisor follow up during file audits.</i> | 4/12/2011 |
| | | | | |
| Dakota | Classification - Review DI95 screen for C0301 and C0401 appointments. Are any out of date? | One entry was out of time frames at Deputy Warden/Unit Administrator's level (Mexia-Soto 223634). DO 801.04, 1.2.3 | <i>Corrected.</i> | 4/12/2011 |
| Dakota | Classification - Does the CO IV supervising the Classification officer review all actions taken by the classification officer, review AIMS data input and ensure all time frames are being met? | Ewoldt 111629 out of time frames for a MAX custody approval. (Warden's level). DO 801.04, 1.2.3.1 | <i>Corrected.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|---|--|-----------------|
| Dakota | Classification - Review the shared drive reports for DI59 and/or DI61 actions, are they within time frames. *** Compare to email notifications sent to Central Classification | Several DI61's had not been completed, unit COIV did not notify Central Classification of the type 07 action. | Staff re-directed and training ongoing. | 4/12/2011 |
| Dakota | Classification - Interview CO III. Does the CO III know the steps to take for a max custody placement? | COIII Valencia-No 48 hour notice given, no DI99 initiated. DO 801.10, 1.1.1.2 through 1.1.1.4 | Training conducted March 8, 2011 for COIII's. | 4/12/2011 |
| Dakota | Classification - Is the inmate being recommended for maximum custody placement being served with the Notice of Hearing and Inmate Rights, (Proposed Maximum Custody Placement) Form 801-6 and a Request for Witness, Form 801-2 at least 48 hours prior to the commencement of the hearing? | Inaccurate dates on the max packet (Parker 166071- apparently served with 48 hour notice two days after actual hearing). DO 801.10, 1.1.1 through 1.1.1.4 | Staff re-directed and training conducted on March 8, 2011. | 4/12/2011 |
| Dakota | Count Movement - Does the shift supervisor or commander review and sign all formal count sheets? | All three of the officers working in the accountability office demonstrated their system of sending count sheets back to the shift commanders for appropriate signatures and reported approximately 70% of the completed count sheets are being sent back for signatures by shift commanders/supervisors. DO 701.04 | Staff re-directed. COS follow-up. | 4/12/2011 |
| Dakota | Count Movement - Observe inmate movement on the units. Are inmates being supervised while being moved? | Inmates were observed returning from recreation passing through a metal detector and returning to the living area without supervision of a staff member in the immediate area. DO 701.05, 1.2.1 | Staff re-directed and training ongoing. Supervisor/shift commander cover at briefings and COS monitor and follow-up. | 4/12/2011 |
| Dakota | Food Service - Are inmates on approved Restricted Diets being fed separately from the general population? | Ms. Herbert indicated inmates on restricted diets are served with the general population. TM 912.07, 1.1 | Inmates on approved restricted diets are fed separately from the general population. | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|--|--|-----------------|
| Dakota | Ingress/Egress - Review Sign-In / Sign-Out logs for entries to ensure information is complete, legible, and consistent with staff entering / exiting the unit | The sign in /sign out log on 02-14-11 did not reflect five of the inspectors who were on the unit. DO 524.04, 1.1.2.1.1 | Staff re-directed and training ongoing. | 4/12/2011 |
| Dakota | Ingress/Egress - Is the assigned officer aware of items which constitute prohibited personal property, such as cellular phones, and hand cuff keys? | Staff working in the lobby were unaware that staff on "travel status" were able to bring in more than \$20. DO 513.01, 1.6.7.2 | Staff re-directed. Post Order revised. | 4/12/2011 |
| Dakota | Ingress/Egress - Evaluate procedure for inspecting food items staff members are attempting to introduce to the unit. Does the unit procedure provide clear guidelines for assigned staff? | Visitation Post Order does not provide any guidelines for the inspection of food items or their need to be carried through the metal detector. DO 513.02, 1.5 | Staff re-directed. Guidelines are outlined in the Ingress/Egress Post Order. | 4/12/2011 |
| Dakota | Keys/Radios - Does the unit have an accurate Master Key Inventory * Review Master Key Inventories and associated documentation for past 12 months.. | Master key inventory does not have the six restricted key sets listed on it for the detention unit. Key control officer COII Pelayo stated they are not documented on the master inventory, but are maintained separately from the rest of the unit keys. He did have an inventory of them on his computer, but they are not included with the monthly inventory. DO 702.02, 1.1 | Corrected; staff re-directed and trained. Keys listed on one master key inventory. | 4/12/2011 |
| Dakota | Keys/Radios - Does the inventory list the number of keys available for each lock/locking device? | The Master key inventory does not list the location of locks and locking devices. Key control officer COII Pelayo stated he does have this information on a different report called a cross reference key report but this report is not included in the monthly key inventory report. DO 702.02, 1.1.3 | Corrected; staff re-directed and trained. Keys listed on one master key inventory. | 4/12/2011 |
| Dakota | Keys/Radios - Is a Locksmith Work Order, Form 702-6 used when repair or replacement of key/key rings are required? | Form 702-6 is not used. Key control officer COII Pelayo uses form 403-2. DO 702.02, 1.2.2.1 | Corrected; Form 702.6 being utilized. Staff re-directed and trained. | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|---|--|-----------------|
| Dakota | Keys/Radios - Each time a key set is issued, or returned does the officer responsible make the appropriate entry in the Key and Credit Card Control sheet (Form 702-1) specifying at a minimum: Key number, date of issue/return, name of authorized staff member, initial | Inspection revealed not all entries are being properly made. Key set #143 was not signed back in but was hanging on its hook in the locker. Set #34 was not present in the storage locker, yet the log showed the name Prieto as being in possession of it but there was no date, time or officers initial signing it out. DO 702.02, 1.4 through 1.4.1.6 | <i>Staff re-directed and training ongoing.</i> | 4/12/2011 |
| Dakota | Keys/Radios - Are the names of both employees logged in the Correctional Journal? | During the inspection, the Main control officer did not log the emergency key box was accessed or the name of the two staff members who accessed it. The officer later stated he could not locate his service journal and had to re-write the log. It is not known if he corrected the discrepancy when re-writing the journal. DO 702.04, 1.4.2 | <i>Staff re-directed and training to ensure 2 officers present and documented in the correctional service journal.</i> | 4/12/2011 |
| Dakota | Keys/Rados - Does each emergency key ring have a clearly visible color coded tag to identify the portals and/or buildings the key set will access? | Key set #6 does not have a color painted on the key set. The color code was supposed to be brown. DO 702.04, 1.6.4 | <i>Corrected.</i> | 4/12/2011 |
| Dakota | Keys/Radios - Are all manufacturer numbers removed from each emergency key so as to not identify the key? | Manufacture numbers are not ground off or removed from emergency keys sets 1 keys B and C, key set 2 keys B and C. DO 702.04, 1.8 | <i>Corrected.</i> | 4/12/2011 |
| Dakota | Keys/Radios - Is there a current Institutional Order addressing the procedural requirements for emergency Key Control? | Institutional Order on site with key control officer was outdated and signed by Ivan Bartos from 6-15-2004. Key control officer Pelayo was not able to demonstrate knowledge of any updated Institutional Order. Captain Koch did not know of any updated Institutional Order for key control. IMPLEMENTATION | <i>Institutional Order has been revised as of January 26, 2011.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|--|---|-----------------|
| Dakota | Keys/Radios - Are the radios serviceable and being utilized properly i.e. use of call signs, clear transmissions, no unnecessary conversation? | Radio call signs or codes were not observed as being regularly used. DO 104.06, 1.1.8 | Staff re-directed and training ongoing. Supervisor/shift commander reviewing in briefing. | 4/12/2011 |
| Dakota | Perimeters/Towers - Close custody units - If the system has perimeter lighting, are all applicable lights operating, with no sign of visible damage, or wear? | During an inspection of the Vindicator alarm system, it was observed there were two quartz lights (DK060 and DK052) were not functional when the zone was activated during the inspection. CO II Rosas stated the lights had been reported as a security device deficiency about a month prior. TM 4.1.5.1.2 | Maintenance repaired on March 16, 2011. | 4/12/2011 |
| Dakota | Security Devices - Were appropriate entries made in the Correctional Service Journal? | Entries were not consistently carried over shift to shift nor were there any entries made when a Security Device deficiency was repaired. (DO 703.01, 1.1.2) | Staff re-directed and training ongoing. | 4/12/2011 |
| Dakota | Security Devices - Has the unit / complex Chief of Security generated a canned statement which demonstrates a consistent approach to documenting security device inspections by all security staff throughout the unit / complex? | The SDIs are not consistently logged in accordance with the canned statement in the post orders. (DO 703.01, 1.3) | Staff re-directed and trained. | 4/12/2011 |
| Dakota | Security Devices - Does the Chief of Security maintain a current file of all documentation relating to inspections, maintenance requests, follow-up actions, and preventive maintenance programs within the institution/unit? | The follow-up actions taken between when a SDI deficiency is reported and when repaired are not included in the log. (DO 703.01, 1.1.3) | COS re-directed and trained. | 4/12/2011 |
| Dakota | Security Devices - Does the Chief of Security ensure SDI work order log repairs are made within time frames? | Logs when SDI deficiency reported and with it is repaired with no explanation for delay. (DO 703.01, 1.4.4) | COS re-directed and trained. | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|---|--|-----------------|
| Dakota | Security Devices - Does the documentation support Deputy Warden's and Chief's of Security submit exception reports noting any deficiencies observed during their tours? | Captain Koch did not submit tour reports for Nov 2010, Dec 2010 and Jan 2011. (DO 703.02, 1.2.6 - 1.2.6.2) | COS re-directed and 703 Inspection Reports are being completed. | 4/12/2011 |
| Dakota | Tools - Are tool stored in a secure area, inaccessible to inmates? | Floor dolly was observed stored in the tool room office. It was not on any master tool inventory nor was it stenciled or painted. DO 710.02, 1.1 | Corrected; listed on master tool inventory. | 4/12/2011 |
| Dakota | Tools - Are tools stored on a shadow board with shadow that closely resembles the tool? | Wheel barrows in tool room do not have shadows outlining the tools. DO 712.02, 1.4.1 | Corrected; shadowed. | 4/12/2011 |
| Dakota | Tools - Are all shadow boards clean, and clearly marked with silhouettes closely mirroring the tools to allow for easily visual inspection and inventories? | Wheel barrows do not have shadows outlining the tools. They are in a box with a painted picture of what appears to be a small picture of a wheel barrow in the box. DO 712.02, 1.4.1 | Corrected; shadowed. | 4/12/2011 |
| Dakota | Weapons - Visually inspect all control rooms where weapons are stored. Are all weapons stored in plain sight and are inventories taken and recorded as required (check the last 90 days of inventories)? | The DART weapons are stored in Dakota Main Control in a locked cabinet with a solid metal door. (DO 716.02, 1.1.2) | Door replaced with expanded metal. | 4/12/2011 |
| Dakota | Weapons - Are staff members who are checking the seal on the DART locker at the beginning of each work shift and its condition documenting their findings in a Correctional Service Journal? | The entries for the DART Weapons Locker seal are sporadic, and when entries are logged, the condition of the seal is not included. The officers are not logging the seal number for the DART Equipment Locker in the journal. (DO 703.02, 1.6.2.1) | Staff re-directed and training ongoing. Shift commander and COS conduct follow up. | 4/12/2011 |
| Dakota | Detention Services - Observe a sanitation inspection during a shift. Are all areas in the unit inspected during the shift? | Inspections were not being conducted during shift indicated by clotheslines and unauthorized items hanging on wall as well as bottles on cell floor. The Day Shift Sergeant and CO II Verdugo were in attendance during the inspection. Reference: DO 804-01, 1.9 | Staff re-directed and training ongoing. | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|---|--|---|-----------------|
| Dakota | Required Services - Are applications stamped "Received" including the date on the reverse side? | Of the 1% reviewed files one application was missing the received stamp. DO 911.01, 1.3.1 | <i>Corrected; staff redirected. Supervisor follow up during file audits.</i> | 4/12/2011 |
| Dakota | Required Services - Do shift commanders tour visitation at a minimum of once per shift during visiting hours? | There were no entries in the Correctional Service Journals reflecting the shift commanders touring the visitation area. DO 911.07, 1.4 | <i>Staff re-directed and trained. COS to conduct follow-up.</i> | 4/12/2011 |
| Dakota | Required Services - During visiting hours, does the on-site duty officer tour visitation once per shift? | There were no entries in the Correctional Service Journals reflecting the on-site duty officer touring the visitation area. DO 911.07, 1.4 | <i>Staff re-directed to ensure tours are annotated.</i> | 4/12/2011 |
| Dakota | Required Services - Are visitation rules posted in the visitation rooms? | There was no observed rules signage in the East or West visitation rooms. DO 911.10, 1.2 | <i>Corrected; rules posted via paper sheets. Process of ordering new signs.</i> | 4/12/2011 |
| Dakota | Required Services - Are property files maintained in terminal digit order? | Property files are stored in numerical order using the first three ADC numbers. DO 909.10, 1.7 | <i>Staff re-directed and trained.</i> | 4/22/2011 |
| | | | | |
| La Paz | Count Movement - Does the shift supervisor or commander review and sign all formal count sheets? | The La Paz Unit count sheets being used for count at 1100 hours included the count for 0400 on 02/15/2011. The graveyard supervisor had not signed the count sheets after the 0400 count had cleared on any of the count sheets being used on the unit for the 1100 count. DO 701.04 | <i>Staff re-directed and training ongoing. (missed 1 out of 10)</i> | 4/12/2011 |
| La Paz | Food Service - Are inmates on approved Restricted Diets being fed separately from the general population? | Mr. Lara indicated inmates on restricted diets are served with the general population. TM 912.07, 1.1 | <i>Inmates on approved restricted diets are fed separately from the general population.</i> | 4/12/2011 |
| La Paz | Ingress/Egress - Evaluate procedure for inspecting food items staff members are attempting to introduce to the unit. Does the unit procedure provide clear guidelines for assigned staff? | The Post Order does not provide any guidelines for the inspection of food items or their need to be carried through the metal detector. DO 513.02, 1.5 | <i>Corrected; Post Order revised. Staff re-directed and trained.</i> | 4/12/2011 |
| La Paz | Keys/Radios - Does the inventory list all lock/locking device locations? | There are not lock/locking device locations listed on the Master key inventory. DO 702.02, 1.1.2 | <i>Completed; list located in main control.</i> | 4/12/2011 |

| Unit Name | Competency | Findings | Action Plan | Completion Date |
|-----------|--|--|--|-----------------|
| La Paz | Keys/Radios - Does the inventory list the number of keys available for each lock/locking device? | Key control officer D. Acosta does not have any report with the number of keys for each lock or locking device. DO 702.02, 1.1.3 | <i>Corrected.</i> | 4/12/2011 |
| La Paz | Keys/Rdios - Did the emergency keys function properly, and access all areas associated with the color coding of the set? | Emergency keys for one zone accessed doors for another zone. Emergency key set #1 (Yellow zone) accessed a door in the purple zone. DO 702.02, 1.2.2 | <i>Corrected; core changed.</i> | 4/12/2011 |
| La Paz | Security Devices - Does the Chief of Security ensure SDI work order log repairs are made within time frames? | Some SDIs took up to seven days to be repaired with no documentation to explain the delay. (DO 703.01, 1.4.4) | <i>Corrected; staff re-directed and training ongoing.</i> | 4/12/2011 |
| La Paz | Tools - Are inventory sheets placed in all areas where tools are stored within the authorized location? | There were no inventory sheets located around the tool sections in the tool room. The master inventory sheets were observed stored in the Class A section for the tool room only. DO 712.02, 1.2.1.4 | <i>Corrected; inventory sheets for each section.</i> | 4/12/2011 |
| La Paz | Tools - Are unserviceable tools removed, and new tools added to the master inventory using the Tool Disposition (Form 712-6)? | There were 3 drill bits broken from 10/2010. (IR verified). The tools are still listed on the Master tool inventory. DO 712.02, 1.2.1.6 | <i>Corrected; removed from inventory.</i> | 4/12/2011 |
| La Paz | Tools - Are unserviceable tools disposed of appropriately, as prescribed in D.O. 304 Equipment and Inventory System? | Unusable tools are still in place and still listed on Master tool inventory without properly being disposed of. DO 712.02, 1.2.1.6 | <i>Corrected; removed from inventory.</i> | 4/12/2011 |
| La Paz | Inmate Management - Are Class C Violations disposed of within five work days of the filing date of the violation? | The Disciplinary Officer indicated Class C Violations are disposed of within 7 work days. DO 803.05, 1.1.1 | <i>Staff re-directed and DHO conducted training on March 16, 2011.</i> | 4/12/2011 |
| La Paz | Inmate Management - Are applications stamped "Received" including the date on the reverse side? | Of the 1% of reviewed files, two applications were missing the received stamp. DO 911.01, 1.3.1 | <i>Corrected; staff re-directed and trained.</i> | 4/12/2011 |
| La Paz | Required Services - Does visitation staff establish and maintain a 4 section visitation file for each inmate? Is all required visitor/visit information entered in AIMS? | Of the 1% of the unit files reviewed, two inmates had AIMS information which did not reflect the approved visitors in the file. 201461 and 104870. 911.01, 1.7.1 | <i>Corrected; staff re-directed and trained.</i> | 4/12/2011 |

